FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P09331** **(0)**

1. Corporation Name

CTX INSURANCE AGENCY, INC.

400001840874
-05/28/96--01034--043
***200.00

Principal Place of Business
9229 LBJ FREEWAY
BLDG 1, STE ~~100~~ 155
DALLAS TX 75243
US

Mailing Address
9229 LBJ FREEWAY
BLDG 1, STE ~~100~~ 155
DALLAS TX 75243
US

3. Date Incorporated or Qualified: 03/06/1986
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21 9229 LBJ PKWY
Suite, Apt. #, etc.
22 BLDG #1, Ste 155
City & State
23 DALLAS, TX
Zip 24 75243 Country 25 DALLAS

2a. Mailing Address
26 3333 Lee PARKWAY
Suite, Apt. #, etc.
27 PO BOX 199000
City & State
28 DALLAS, TX
Zip 29 75219 Country 30 DALLAS

4. FEI Number: 75-1425434 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	OLIVER, FRANCES C.	
STREET ADDRESS	2401 LONDON	
CITY-ST-ZIP	PLANO TX	
TITLE	VS	☐ DELETE
NAME	SOMMERFIELD, JACK	
STREET ADDRESS	3322 BLUFFVIEW	
CITY-ST-ZIP	GARLAND TX	
TITLE	VT	☐ DELETE
NAME	ANDERSON, ROSS T.	
STREET ADDRESS	3206 OAK HILL	
CITY-ST-ZIP	GARLAND TX	
TITLE	VM	✓ DELETE
NAME	HOFFMAN, CHARLES W.	
STREET ADDRESS	3424 EISENHOWER	
CITY-ST-ZIP	PLANO TX	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☑ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	3333 Lee PKWY	
1.4 CITY-ST-ZIP	DALLAS, TX 75219	
2.1 TITLE		☑ Change ☐ Addition
2.2 NAME	3710 RAWLINS	
2.3 STREET ADDRESS	~~PO BOX 199000~~	
2.4 CITY-ST-ZIP	DALLAS, TEXAS 75219	
3.1 TITLE		☑ Change ☐ Addition
3.2 NAME	3710 RAWLINS	
3.3 STREET ADDRESS	~~PO BOX 199000~~	
3.4 CITY-ST-ZIP	DALLAS, TX 75219	
4.1 TITLE		☑ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	D	☐ Change ☑ Addition
5.2 NAME	Michael S. Albright	
5.3 STREET ADDRESS	3333 Lee Pkwy	
5.4 CITY-ST-ZIP	DALLAS, TX 75219	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

a 5/1/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: _____ 4/25/96 (214) 559-6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Frances Oliver, President

CORPORATION: CTX INSURANCE AGENCY, INC.

THE ADDRESS OF ALL OFFICERS LISTED BELOW IS:

3333 LEE PARKWAY
~~P.O. BOX 199000~~
DALLAS, TEXAS 75219

* 3710 RAWLINS
~~PO BOX 199000~~
DALLAS, TX 75219

DIRECTORS:

Michael S. Albright
Ross T. Anderson
Frances Oliver
Jack Sommerfield

OFFICERS:

President	Frances Oliver
Vice President and Treasurer	Ross T. Anderson *
Vice President and Secretary	Jack Sommerfield *