

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20923

FILED
Feb 07, 2012
Secretary of State

Entity Name: WELLINGTON RISK INSURANCE AGENCY, INC.

Current Principal Place of Business:

6801 CALMONT
FORT WORTH, TX 76116 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 230
FORT WORTH, TX 76101

New Mailing Address:

FEI Number: 75-2234314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: POSTON, PAUL R
Address: 6801 CALMONT
City-St-Zip: FT. WORTH, TX 761164108 US

Title: VD
Name: MCPADDEN, M SEAN
Address: 6801 CALMONT
City-St-Zip: FT WORTH, TX 761164108

Title: S/D
Name: HYMAN, CAROLYN B
Address: 6801 CALMONT
City-St-Zip: FT WORTH, TX 761164108 US

Title: VTD
Name: DITTMAR, JAN M
Address: 6801 CALMONT
City-St-Zip: FT WORTH, TX 761164108 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAN M DITTMAR

VPT

02/07/2012

Electronic Signature of Signing Officer or Director

Date