

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000004798

**FILED**  
**Apr 28, 2016**  
**Secretary of State**  
**CC8430202183**

**Entity Name:** USAA FINANCIAL PLANNING SERVICES INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

9800 FREDERICKSBURG ROAD  
SAN ANTONIO, TX 78288-4501

**Current Mailing Address:**

9800 FREDERICKSBURG ROAD  
SAN ANTONIO, TX 78288-4501

**FEI Number:** 74-2789646

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title ASST. SECRETARY  
Name SMITH, KENNETH W  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title DIRECTOR, SENIOR VICE PRESIDENT, VC  
Name MCNAMARA, DANIEL S  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title SENIOR VICE PRESIDENT, DIRECTOR  
Name GROTHUES, THOMAS J  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title VP  
Name PAWLOSKI, JOHN N  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title VP  
Name REGISTER, KIRSTEN M  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title VP  
Name ROSENBERGER, LARRY  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title VP  
Name WAGEMAN, PATRICK A  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title VP, TREASURER  
Name URBANCZYK, ROSE M  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

**Continues on page 2**

*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:** CARY W. SMITH

**ASSISTANT VP**

**04/28/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT VP  
Name SMITH, CARY W  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title SECRETARY  
Name SCHREDER, SCOTT  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title DIRECTOR  
Name STORK, MARY  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title CHIEF COMPLIANCE OFFICER  
Name ANDERSEN, JOSHUA  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title DIRECTOR, CHAIRMAN  
Name TEAGUE, PATRICIA M  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501

Title ASSISTANT VP  
Name ALLISON, SCOTT G  
Address 9800 FREDERICKSBURG ROAD  
City-State-Zip: SAN ANTONIO TX 78288-4501