

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000004678

**Entity Name:** INVESCO INSURANCE AGENCY, INC.

**FILED**  
**Apr 16, 2019**  
**Secretary of State**  
**0064090750CC**

**Current Principal Place of Business:**

11 GREENWAY PLAZA  
ATTN: MANDI SCHNEIDER SUITE 1000  
HOUSTON, TX 77046

**Current Mailing Address:**

11 GREENWAY PLAZA  
ATTN: MANDI SCHNEIDER SUITE 1000  
HOUSTON, TX 77046 US

**FEI Number: 76-0457666**

**Certificate of Status Desired: Yes**

**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 DIRECTOR, CHAIRMAN AND PRESIDENT  
Name SCHLOSSBERG, ANDREW R  
Address 1555 PEACHTREE ST NE  
City-State-Zip: ATLANTA GA 30309

Title VP  
Name OTTINGER, SANDRA C  
Address 11 GREENWAY PLAZA SUITE 1000  
City-State-Zip: HOUSTON TX 77046

Title TREASURER  
Name LEGE, ANNETTE  
Address 1555 PEACHTREE ST NE  
City-State-Zip: ATLANTA GA 30309

Title DIRECTOR AND SENIOR VP  
Name ZERR, JOHN  
Address 11 GREENWAY PLAZA SUITE 1000  
City-State-Zip: HOUSTON TX 77046

Title AS  
Name DAVIDSON, PETER  
Address 11 GREENWAY PLAZA SUITE 1000  
City-State-Zip: HOUSTON TX 77046

Title DIRECTOR AND SENIOR VP  
Name WENDLER, GARY  
Address 11 GREENWAY PLAZA ATTN: MANDI SCHNEIDER SUITE 1000  
City-State-Zip: HOUSTON TX 77046

Title ASSISTANT SECRETARY  
Name RINGOLD, MELANIE  
Address 11 GREENWAY PLAZA ATTN: MANDI SCHNEIDER SUITE 1000  
City-State-Zip: HOUSTON TX 77046

Title OTHER, HEAD OF HUMAN RESOURCES, NORTH AMERICA  
Name RARICK, RICHARD  
Address 11 GREENWAY PLAZA ATTN: MANDI SCHNEIDER SUITE 1000  
City-State-Zip: HOUSTON TX 77046

**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: SANDRA OTTINGER**

**VICE PRESIDENT**

**04/16/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SENIOR VICE PRESIDENT, ASST. SECRETARY  
Name KUPOR, JEFFREY H  
Address 1555 PEACHTREE STREET  
City-State-Zip: ATLANTA GA 30309