

No. <b>C 164348</b>		<b>Due no later than Jan 31, 2017 Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  FINANCIAL INSURANCE MARKETING GROUP, INC. 601 RIVERSIDE AVE JACKSONVILLE FL 32204 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JACK DAVIS	601 RIVERSIDE AVE	JACKSONVILLE	FL	USA	32204	
TREASURER	JACK DAVIS	601 RIVERSIDE AVE	JACKSONVILLE	FL	USA	32204	
SECRETARY	JACK DAVIS	601 RIVERSIDE AVE	JACKSONVILLE	FL	USA	32204	
DIRECTOR	ROBERT LEGTERS	601 RIVERSIDE AVE	JACKSONVILLE	FL	USA	32204	
PRESIDENT	ROBERT LEGTERS	601 RIVERSIDE AVE	JACKSONVILLE	FL	USA	32204	
5. Organized Under the Laws of:  <b>DC C 164348</b>		6. Annual Report must be signed.*  Signature: Kelly Lettmann Name (type or print): Kelly Lettmann					
		Date: 12/19/2016 Title: POA					
Processed 12/19/2016		* Electronically provided signatures are accepted as original signatures.					