

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212554273

1.) CORPORATION NAME:

Infinity Premier Insurance Company

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1055120**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	25,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TX

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7920 Beltline Road
Suite 800

CITY/ST/ZIP: Dallas, TX 75254

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	Jason L Jelen	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5420 LBJ Freeway Suite 1000		
CITY/ST/ZIP/CO:	Dallas, TX 75240		
NAME:	Robert C Moore	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	800 Overlook III 2859 Paces Ferry Road		
CITY/ST/ZIP/CO:	Atlanta, GA 30339		
NAME:	William C. Tepe	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	800 Overlook III 2859 Paces Ferry Road		
CITY/ST/ZIP/CO:	Atlanta, GA 30339		
NAME:	Jay Grob	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5420 LBJ Freeway Suite 1000		
CITY/ST/ZIP/CO:	Dallas, TX 75240		
NAME:	Neal Holford	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	7920 Beltline Road Suite 800		
CITY/ST/ZIP/CO:	Dallas, TX 75254		

NAME: H. Scott Coy TITLE: Executive VP ADDRESS: 7920 Beltline Road CITY/ST/ZIP/CO: Dallas, TX 75254	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Ned N. Fleming, III TITLE: DIRECTOR ADDRESS: 5420 LBJ Freeway Suite 1000 CITY/ST/ZIP/CO: Dallas, TX 75240	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Mark Matteson TITLE: DIRECTOR ADDRESS: 5420 LBJ Freeway Suite 1000 CITY/ST/ZIP/CO: Dallas, TX 75240	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Barrett Bruce TITLE: DIRECTOR ADDRESS: 5420 LBJ Freeway Suite 1000 CITY/ST/ZIP/CO: Dallas, TX 75240	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ Robert C Moore	Robert C Moore, SECRETARY	2/18/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		