

1.) CORPORATION NAME: Combined Group Insurance Services, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: TX	DUE DATE: 8/31/2012 SCC ID NO: F1718420 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
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6.) PRINCIPAL OFFICE ADDRESS:	ADDRESS: 14785 PRESTON ROAD STE 350 CITY/ST/ZIP: DALLAS, TX 75254
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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: BLAKE Y STOCK TITLE: PRESIDENT ADDRESS: 14785 PRESTON ROAD STE 350 CITY/ST/ZIP/CO: DALLAS, TX 75254	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: LAUREL L GRAMMIG TITLE: VP/SEC ADDRESS: 655 N FRANKLIN ST STE 1900 CITY/ST/ZIP/CO: TAMPA, FL 33602	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: CORY T WALKER TITLE: VICE PRESIDENT ADDRESS: 220 S RIDGEWOOD AVE CITY/ST/ZIP/CO: DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: JOSEPH S FAILLA, JR TITLE: TREASURER ADDRESS: 220 S RIDGEWOOD AVE CITY/ST/ZIP/CO: DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: ANTHONY T STRIANESE TITLE: DIR/CHAIRMAN ADDRESS: 303 CORPORATE CENTER DR SUITE 300 CITY/ST/ZIP/CO: STOCKBRIDGE, GA 30281	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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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/ LAUREL L GRAMMIG	LAUREL L GRAMMIG, VP/SEC	8/31/2012
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.