



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012**

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000149600		2. Name of Corporation CAL FED INSURANCE AGENCY, INC			
3. Street Address Principal Business Office 1000 TECHNOLOGY DRIVE			City O'FALLON	State MO	Zip 63368
4. Business Phone No. (813) 604-8115		5. State of Incorporation CALIFORNIA			
6. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE AGENCY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CAROLYN S MCCORMICK			Vice President Name Lisa A. Hoffman		
Street Address 3001 MEACHAM BLVD			Street Address 3800 Citigroup Center Dr		
City FT WORTH	State TX	Zip 76137	City Tampa	State FL	Zip 33610
Secretary Name JEFFERY L BOYHER			Treasurer Name JEFFERY L BOYHER		
Street Address 1000 TECHNOLOGY DRIVE			Street Address 1000 TECHNOLOGY DRIVE		
City O'FALLON	State MO	Zip 63368	City O'FALLON	State MO	Zip 63368
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name HERBERT C GOVER			Director Name RALPH O COLLINS, III		
Street Address 4000 REGENT BLVD			Street Address 1000 TECHNOLOGY DRIVE		
City IRVING	State TX	Zip 75063	City O'FALLON	State MO	Zip 63368
Director Name ANNETTE DESAULNIERS			Director Name NONE		
Street Address 1000 TECHNOLOGY DRIVE			Street Address		
City O'FALLON	State MO	Zip 63368	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 1000	Class/Series COMMON	Par Value 0.00
			THIS SECTION MUST BE COMPLETED		

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**FILED**

File Date: JAN 31 2012

Check No. \_\_\_\_\_

By: 5113430246

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Lisa A Hoffman 1-30-12  
Signature Date

LISA A HOFFMAN

Print or Type Name

VICE PRESIDENT

Title