

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLOIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **833388** (2)
1. Corporation Name
AMERICAN GENERAL PROPERTY INSURANCE COMPANY



Principal Place of Business Mailing Address
AMERICAN GENERAL CENTER NASHVILLE TN 37250 **AMERICAN GENERAL CENTER NASHVILLE TN 37250**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/20/1974	3a. Date of Last Report 03/21/1995
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.			4. FEI Number 62-0929818	Applied For Not Applicable
22. City & State	27. City & State			5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
INSURANCE COMMISSIONER CAPITOL BLDG. TALLAHASSEE FL				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City	FL	85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: S	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ROBERTS, REX H		1.2 NAME	
STREET ADDRESS: AMERICAN GENERAL CNTR		1.3 STREET ADDRESS	
CITY-ST-ZIP: NASHVILLE TN		1.4 CITY-ST-ZIP	
TITLE: CD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: TUERFF, JAMES R.		2.2 NAME	
STREET ADDRESS: 2929 ALLEN PARKWAY		2.3 STREET ADDRESS	
CITY-ST-ZIP: HOUSTON TX		2.4 CITY-ST-ZIP	
TITLE: PD	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: D'AGOSTINO, JAMES S JR.		3.2 NAME	C/D D'Agostino, James S., Jr.
STREET ADDRESS: AMERICAN GENERAL CENTER N/A		3.3 STREET ADDRESS	American General Center
CITY-ST-ZIP: NASHVILLE TN		3.4 CITY-ST-ZIP	Nashville, TN 37250
TITLE: SVD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: LEBOS, LEO JR.		4.2 NAME	
STREET ADDRESS: AMERICAN GENERAL CENTER		4.3 STREET ADDRESS	
CITY-ST-ZIP: NASHVILLE TN		4.4 CITY-ST-ZIP	
TITLE: VCD	<input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: DEVLIN, ROBERT M.		5.2 NAME	SrC/D Devlin, Robert M.
STREET ADDRESS: 2929 ALLEN PARKWAY		5.3 STREET ADDRESS	2929 Allen Parkway
CITY-ST-ZIP: HOUSTON TX		5.4 CITY-ST-ZIP	Houston, TX 77019
TITLE: SVD	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: GIBBS, MARCUS C.		6.2 NAME	
STREET ADDRESS: AMERICAN GENERAL CENTER		6.3 STREET ADDRESS	
CITY-ST-ZIP: NASHVILLE TX		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 1-31-96 615-749-1993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

AMERICAN GENERAL PROPERTY INSURANCE COMPANY

7. VC/D
Newton, Jon P.
2929 Allen Parkway
Houston, TX 77019
8. SV/D
Tasser, Donald J.
American General Center
Nashville, TN 37250
9. SV/T/D
Barrett, Kent E.
American General Center
Nashville, TN 37250
10. VP
Bergh, Marcus B., Jr.
American General Center
Nashville, TN 37250
11. VP
Betts, Michael A.
American General Center
Nashville, TN 37250
12. VP
Billante, Samuel J.
American General Center
Nashville, TN 37250
13. VP
Cobb, Alice A.
American General Center
Nashville, TN 37250
14. VP
Coleman, John W.
American General Center
Nashville, TN 37250

15. VP
Field, Stephen H.
2929 Allen Parkway
Houston, TX 77019
16. VP
McCampbell, Allen A., Jr.
American General Center
Nashville, TN 37250
17. VP
Mosely, David H.
American General Center
Nashville, TN 37250
18. VP
Pulliam, J. Thomas, Jr.
American General Center
Nashville, TN 37250
19. VP/D
Tuters, Peter V.
2929 Allen Parkway
Houston, TX 77019