

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	212521677				
1.) CORPORATION NAME: <b>A+ TRUCK INSURANCE, INC.</b>		DUE DATE: <b>4/30/2012</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>KRISTINA ROGERS 12108 WASHINGTON HWY ASHLAND, VA 23005</b>		SCC ID NO: <b>05199591</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HANOVER COUNTY</b>		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
CLASS	AUTHORIZED					
COMMON	100					
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 12108 WASHINGTON HWY  CITY/ST/ZIP: ASHLAND, VA 23005						
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: KRISTINA ROGERS TITLE: PRESIDENT ADDRESS: 2304 PATHFINDER COURT CITY/ST/ZIP/CO: RICHMOND, VA 23294	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: JULIE GATES TITLE: VICE PRESIDENT ADDRESS: 103 Race Course Street CITY/ST/ZIP/CO: ASHLAND, VA 23005	<input checked="" 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/ JULIE GATES SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JULIE GATES, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	6/11/2012 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.						