

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213503815

1.) CORPORATION NAME:

**KROL INSURANCE & RISK MANAGEMENT CONSULTING,  
INC.**

DUE DATE: **3/31/2013**

SCC ID NO: **06123145**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PETER LIPRESTI  
7105 WOODRISE CT  
FAIRFAX STATION, VA 22039**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10075 RED RUN BOULEVARD STE 500

CITY/ST/ZIP: OWINGS MILLS, MD 21117

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: MARK A KROL  
TITLE: PRES/TREAS/SEC  
ADDRESS: 10075 ROD RUN BLVD STE 500  
CITY/ST/ZIP/CO: OWINGS MILL, MD 21117

OFFICER

DIRECTOR

NAME: BEVERLY S KROL  
TITLE: DIRECTOR  
ADDRESS: 4632 E DESERT DR  
CITY/ST/ZIP/CO: PHOENIX, AZ 85044

OFFICER

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/ MARK A KROL

MARK A KROL, PRES/TREAS/SEC

1/25/2013

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.