

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212511787
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1.) CORPORATION NAME: Nason Insurance Services, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GILBERT L NASON 30 SANDY POINT CT UNION HALL, VA 24176 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FRANKLIN COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 3/31/2012 SCC ID NO: 06134571 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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 30 SANDY POINT CT CITY/ST/ZIP: UNION HALL, VA 24176
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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: GILBERT L NASON TITLE: DIR/PRES ADDRESS: 30 SANDY POINT CT CITY/ST/ZIP/CO: UNION HALL, VA 24176	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: AMY E NASON TITLE: VICE PRESIDENT ADDRESS: 30 SANDY POINT CT CITY/ST/ZIP/CO: UNION HALL, VA 24176	<input checked="" 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/ GILBERT L NASON	GILBERT L NASON, DIR/PRES	3/30/2012
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.