

SCC eFile

**2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

215503317

1.) CORPORATION NAME:

**Colonial Insurance Services Inc.**

DUE DATE: **3/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PATRICK T O'DONNELL  
5251-58 JOHN TYLER HWY  
WILLIAMSBURG, VA**

SCC ID NO: **06918668**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**WILLIAMSBURG CITY (FILED IN JAMES CITY COUNTY)**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PATRICK O'DONNELL  
5251-58 JOHN TYLER HWY

CITY/ST/ZIP: WILLIAMSBURG, VA 23185

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:	PATRICK O'DONNELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6749 HIDDEN WOODS DRIVE		
CITY/ST/ZIP/CO:	ROANOKE, VA 24018		

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/ PATRICK O'DONNELL	PATRICK O'DONNELL, DIRECTOR	1/22/2015
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.