

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	213531054
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1.) CORPORATION NAME: <b>Apex Insurance Agency, Inc.</b>	DUE DATE: <b>7/31/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA</b>	SCC ID NO: <b>06977888</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO 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>2,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	2,500
CLASS	AUTHORIZED				
COMMON	2,500				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 201 CONCOURSE BLVD  
STE 260

CITY/ST/ZIP: GLEN ALLEN, VA 23060

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: KARL F SNEARER TITLE: PRESIDENT ADDRESS: 201 CONCOURSE BLVD SUITE 260 GLEN ALLEN, VA 23060 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: LAUREL L GRAMMIG TITLE: VP/S ADDRESS: 655 N. Franklin St. STE 1900 TAMPA, FL 33602 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: CORY T WALKER TITLE: VICE PRESIDENT ADDRESS: 220 S RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: ANTHONY T STRIANESE TITLE: DIRECTOR ADDRESS: 303 CORPORATE CENTER DRIVE STE 300 STOCKBRIDGE, GA 30281 CITY/ST/ZIP/CO:	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: Joseph Stanton TITLE: TREASURER ADDRESS: 1815 Griffin Road, Ste. 300 Ft. Lauderdale, FL 33004 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input 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/ LAUREL L GRAMMIG	LAUREL L GRAMMIG, VP/S	7/1/2013
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.