

1.) CORPORATION NAME:

**HomeTown Insurance Services, Inc.**

DUE DATE: **2/28/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM R RAKES  
10 FRANKLIN ROAD SE STE 800  
ROANOKE, VA**

SCC ID NO: **07055601**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	25,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ROANOKE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 202 S JEFFERSON ST  
CITY/ST/ZIP: ROANOKE, VA 24011

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TERRANCE E O'SHAUGHNESSY	
TITLE:	PRESIDENT	
ADDRESS:	1201 PERSINGER ROAD	
CITY/ST/ZIP/CO:	ROANOKE, VA 24015	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PETER JESSEE	
TITLE:	VICE PRESIDENT	
ADDRESS:	3250 ALLENDALE ST	
CITY/ST/ZIP/CO:	ROANOKE, VA 24014	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LESLIE M PRUITT	
TITLE:	VICE PRESIDENT	
ADDRESS:	1815 DALE AVENUE	
CITY/ST/ZIP/CO:	ROANOKE, VA 24013	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CHARLES W MANESS, JR.	
TITLE:	S/T	
ADDRESS:	4680 GARTH DRIVE	
CITY/ST/ZIP/CO:	SALEM, VA 24153	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WILLIAM C MOSES	
TITLE:	DIRECTOR	
ADDRESS:	2214 ROSS LANE	
CITY/ST/ZIP/CO:	ROANOKE, VA 24015	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SUSAN K STILL	
TITLE:	DIRECTOR	
ADDRESS:	5114 HUNTING HILLS 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/ CHARLES W MANESS, JR.	CHARLES W MANESS, JR., S/T	4/2/2015
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.		