

SCC eFile  
(6/10)

2011 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

211508251

1.) CORPORATION NAME:

**TODD ROSE INSURANCE AGENCY, INC.**

DUE DATE: **6/30/2011**

SCC ID NO: **07103435**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR**

**I. TODD ROSE**

**1801 S CHURCH STREET  
SMITHFIELD, VA 23430**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ISLE OF WIGHT COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1801 S CHURCH ST

CITY/ST/ZIP: SMITHFIELD, VA 23430-

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: SANDRA B ROSE  
TITLE: SECRETARY  
ADDRESS: 1801 S CHURCH ST  
CITY/ST/ZIP/CO: SMITHFIELD, VA 23430-

OFFICER

DIRECTOR

NAME: TODD ROSE  
TITLE: DIRECTOR  
ADDRESS: 1801 S CHURCH ST  
CITY/ST/ZIP/CO: SMITHFIELD, VA 23430-

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/ TODD ROSE

TODD ROSE, DIRECTOR

4/22/2011

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.