

1.) CORPORATION NAME:

MedAmerica Insurance Company

DUE DATE: **12/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**W BIRCH DOUGLASS III
MCGUIREWOODS LLP
GATEWAY PLAZA, 800 E. CANAL STREET**

SCC ID NO: **F0193385**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 651 HOLIDAY DR
FOSTER PLAZA BLDG 5, STE 300

CITY/ST/ZIP: PITTSBURGH, PA 15220-2740

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:	WILLIAM NAYLON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	165 COURT ST		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

NAME:	CHERYL BUSH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP OPNS		
ADDRESS:	165 COURT STREET		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

NAME:	WILLIAM L NAYLON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/FIN/CAP MAR		
ADDRESS:	165 COURT STREET		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

NAME:	DOROTHY A COLEMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	165 COURT STREET		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

NAME:	STEPHEN R SLOAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	165 COURT ST		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

NAME:	CHRISTOPHER BOOTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 COURT STREET		
CITY/ST/ZIP/CO:	ROCHESTER, NY 14647		

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/ WILLIAM NAYLON	WILLIAM NAYLON, PRESIDENT	12/3/2015
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.