

1.) CORPORATION NAME:

AMERICAN RESOURCES INSURANCE COMPANY, INC.

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL E HARMAN
4951 LAKE BROOK DR STE 100
GLEN ALLEN, VA**

SCC ID NO: **F0521528**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

AL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1111 HILLCREST ROAD
SUITE 100

CITY/ST/ZIP: MOBILE, AL 36695

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:	STEPHEN G PATE	
TITLE:	PRESIDENT	
ADDRESS:	1111 HILLCREST ROAD SUITE 100	
CITY/ST/ZIP/CO:	MOBILE, AL 36695	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES C WILSON JR	
TITLE:	SECRETARY	
ADDRESS:	1716 PUMPHOUSE LANE	
CITY/ST/ZIP/CO:	BIRMINGHAM, AL 35243	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES P BRYAN	
TITLE:	DIRECTOR	
ADDRESS:	1221 LAMAR ST STE 1175	
CITY/ST/ZIP/CO:	HOUSTON, TX 77010	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	THOMAS L FERRERI	
TITLE:	DIRECTOR	
ADDRESS:	10 BROWNSBORO HILL RD	
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40207	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ANTHONY P MARINO	
TITLE:	DIRECTOR	
ADDRESS:	4217 LOMAC STREET	
CITY/ST/ZIP/CO:	MONTGOMERY, AL 36106	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES L RIDDLE	
TITLE:	DIRECTOR	
ADDRESS:	P. O. BOX 549	
CITY/ST/ZIP/CO:	MADISONVILLE, KY 42431	

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/ STEPHEN G PATE	STEPHEN G PATE, PRESIDENT	8/14/2013
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.		