

1.) CORPORATION NAME:

BANCINSURE, INC.

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1199738**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OK

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5104 N FRANCIS
SUITE 101

CITY/ST/ZIP: OKLAHOMA CITY, OK 73118

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:	LISA GAYLE BAYS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5104 N FRANCIS AVE SUITE 101		
CITY/ST/ZIP/CO:	OKLAHOMA CITY, OK 73118		

NAME:	MARK A KRIENKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	5104 N FRANCIS SUITE 101		
CITY/ST/ZIP/CO:	OKLAHOMA CITY, OK 73118		

NAME:	ROBB NM EVANS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11450 SHELDON ST		
CITY/ST/ZIP/CO:	SUN VALLEY, CA 91352-1121		

NAME:	STEPHEN I FRATES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	255 BRADENTON AVE		
CITY/ST/ZIP/CO:	DUBLIN, OH 43017		

NAME:	WILLIAM O JOHNSTONE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	101 N BROADWAY SUITE 400		
CITY/ST/ZIP/CO:	OKLAHOMA CITY, OK 73102		

NAME: LESLIE O NESVIG TITLE: DIRECTOR ADDRESS: 204 6TH AVE CITY/ST/ZIP/CO: LAMOURE, ND 58458	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GALEN THOMAS PATE TITLE: DIRECTOR ADDRESS: 1053 W MULLIGAN DR CITY/ST/ZIP/CO: ORA VALLEY, AZ 85737	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JONATHAN H PATE TITLE: DIRECTOR ADDRESS: 1276 S ROBERT ST CITY/ST/ZIP/CO: WEST ST PAUL, MN 55118	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PAUL P PRUDDEN, III TITLE: DIRECTOR ADDRESS: 2642 E 21ST ST CITY/ST/ZIP/CO: SUITE 105 TULSA, OK 74114	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES E T SANDBERG, JR TITLE: DIRECTOR ADDRESS: 203 W 10TH CITY/ST/ZIP/CO: AUSTIN, TX 78701	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES W WALLIS TITLE: DIRECTOR ADDRESS: 6410-B N SANTA FE CITY/ST/ZIP/CO: OKLAHOMA CITY, OK 73116	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: James N Cross TITLE: SECRETARY ADDRESS: 5104 N Francis Ave CITY/ST/ZIP/CO: Ste 101 Oklahoma City, OK 73118	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> 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/ LISA GAYLE BAYS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LISA GAYLE BAYS, PRESIDENT PRINTED NAME AND CORPORATE TITLE	12/1/2012 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.		