

1.) CORPORATION NAME: DEALERS ASSURANCE COMPANY	DUE DATE: 12/31/2012				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060	SCC ID NO: F1238833				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: OH	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>3,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	3,000
CLASS	AUTHORIZED				
COMMON	3,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3518 RIVERSIDE DR.
CITY/ST/ZIP: UPPER ARLINGTON, OH 43221

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: EDMOND MELGER ECKERT		
TITLE: SR VP		
ADDRESS: 3518 RIVERSIDE DRIVE		
CITY/ST/ZIP/CO: UPPER ARLINGTON, OH 43221		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHARON M SPOHN		
TITLE: TREASURER		
ADDRESS: 3518 RIVERSIDE DRIVE		
CITY/ST/ZIP/CO: UPPER ARLINGTON, OH 43221		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KIRK A BORCHARDT		
TITLE: CEO		
ADDRESS: 510 CASTILLO STREET		
CITY/ST/ZIP/CO: STE 101 SANTA BARBARA, CA 93101		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAN E GEORGE		
TITLE: DIRECTOR		
ADDRESS: 3518 RIVERSIDE DRIVE		
CITY/ST/ZIP/CO: UPPER ARLINGTON, OH 43221		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES B SMITH		
TITLE: DIRECTOR		
ADDRESS: 2400 LOUISIANA BLVD NE		
CITY/ST/ZIP/CO: BLDG 4 ALBUQUERQUE, NM 87110		

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/ SHARON M SPOHN	SHARON M SPOHN, TREASURER	11/5/2012
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.