

1.) CORPORATION NAME: CALEDONIAN INSURANCE GROUP, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: WA	DUE DATE: 12/31/2012 SCC ID NO: F1318809 5.) STOCK INFORMATION <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>50,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	50,000
CLASS	AUTHORIZED				
COMMON	50,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 60

CITY/ST/ZIP: MERCER ISLAND, WA 98040-0060

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: ANTHONY H COWAN		
TITLE: CHAIRMAN		
ADDRESS: PO BOX 60		
CITY/ST/ZIP/CO: MERCER ISLAND, WA 98040-0060		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: LAURENCE J MALONEY		
TITLE: VICE CHAIRMAN		
ADDRESS: P O BOX 60		
CITY/ST/ZIP/CO: MERCER ISLAND, WA 98040		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JENNIFER H COWAN		
TITLE: S/T		
ADDRESS: PO BOX 60		
CITY/ST/ZIP/CO: MERCER ISLAND, WA 98040-0060		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PHILLIP STONEBRAKER		
TITLE: DIRECTOR		
ADDRESS: 1029 MAIN STREET		
CITY/ST/ZIP/CO: LEWISTON, ID 83501		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jeremy McCaslin		
TITLE: DIRECTOR		
ADDRESS: PO Box 60		
CITY/ST/ZIP/CO: Mercer Island, WA 98040		

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/ Jeremy McCaslin	Jeremy McCaslin, DIRECTOR	12/6/2012
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.