

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	212513315
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1.) CORPORATION NAME: <b>ALEXANDER INSURANCE SERVICES, LTD.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>BUSINESS FILINGS INCORPORATED          4701 COX ROAD, STE. 301          GLEN ALLEN, VA 23060-6802</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	DUE DATE: <b>5/31/2012</b> SCC ID NO: <b>F1379066</b> 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>9,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	9,000
CLASS	AUTHORIZED				
COMMON	9,000				

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 3560 CHALLENGER DR STE 108  CITY/ST/ZIP: LAKE HAVASU CITY, AZ 86406
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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.
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NAME: CONNIE M ALEXANDER TITLE: PRESIDENT ADDRESS: 2649 PLAZA HERMOSA CITY/ST/ZIP/CO: LAKE HAVASU CITY, AZ 86406	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: CHAD M NICH TITLE: VP/S/T ADDRESS: 1775 BIMINI LN #E4 CITY/ST/ZIP/CO: LAKE HAVASU CITY, AZ 86403	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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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/ CONNIE M ALEXANDER	CONNIE M ALEXANDER, PRESIDENT	4/13/2012
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.