

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212512873

1.) CORPORATION NAME:

CBIZ Insurance Services, Inc.

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1421074**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
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| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 44 BALTIMORE ST

CITY/ST/ZIP: CUMBERLAND, MD 21502

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: Mike Gill OFFICER DIRECTOR
 TITLE: PRESIDENT
 ADDRESS: 11440 Tomahawk Creek Parkway
 CITY/ST/ZIP/CO: Leawood, KS 66211

NAME: JOSEPH P GEORGE OFFICER DIRECTOR
 TITLE: SR VP
 ADDRESS: 44 BALTIMORE ST
 CITY/ST/ZIP/CO: CUMBERLAND, MD 21502

NAME: BRUCE J. KOWALSKI OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 6050 OAK TREE BLVD., SUITE 500
 CITY/ST/ZIP/CO: CLEVELAND, OH 44131

NAME: MICHAEL W. GLEESPEN OFFICER DIRECTOR
 TITLE: SECRETARY
 ADDRESS: 6050 OAK TREE BLVD., SUTIE 500
 CITY/ST/ZIP/CO: CLEVELAND, OH 44131

NAME: JOHN J. GEFFERT OFFICER DIRECTOR
 TITLE: ASST SECRETARY
 ADDRESS: 6050 OAK TREE BLVD., SUITE 500
 CITY/ST/ZIP/CO: CLEVELAND, OH 44131

NAME: NANCY M. MELLARD OFFICER DIRECTOR
 TITLE: ASST SECRETARY
 ADDRESS: 11440 TOMAHAWK CREEK PARKWAY
 CITY/ST/ZIP/CO: LEAWOOD, KS 66211

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|--|---|---|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KELLY J. MAREK TREASURER 6050 OAK TREE BLVD., SUITE 500 CLEVELAND, OH 44131 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | ROBERT A. O'BYRNE EVP 11440 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JEROME P. GRISKO, JR DIRECTOR 6050 OAK TREE BLVD S, STE. 500 CLEVELAND, OH 44131 | <input type="checkbox"/> OFFICER | <input checked="" 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/ MICHAEL W. GLEESPEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | MICHAEL W. GLEESPEN, SECRETARY PRINTED NAME AND CORPORATE TITLE | 4/10/2012 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. | | | |