

1.) CORPORATION NAME:

DUE DATE: **11/30/2011**

**Pedigo-Lessenberry Insurance Agency, Inc.**

SCC ID NO: **F1447590**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**NATIONAL REGISTERED AGENTS INC**

**4001 North Ninth Street, Suite 227**

**ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**KY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 103 PIN OAK LN

CITY/ST/ZIP: GLASGOW, KY 42141-

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: MICHAEL D MC CANDLESS  
TITLE: PRESIDENT  
ADDRESS: 103 PIN OAK LA  
CITY/ST/ZIP/CO: GLASGOW, KY 42141-

OFFICER

DIRECTOR

NAME: WILLIAM F MURREY  
TITLE: EXEC VP  
ADDRESS: 103 PIN OAK LA  
CITY/ST/ZIP/CO: GLASGOW, KY 42141-

OFFICER

DIRECTOR

NAME: TERRI A MURREY  
TITLE: SEC/TREAS  
ADDRESS: 103 PIN OAK LN  
CITY/ST/ZIP/CO: GLASGOW, KY 42141-

OFFICER

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/ TERRI A MURREY

TERRI A MURREY, SEC/TREAS

11/2/2011

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.