

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214548079

1.) CORPORATION NAME:

Craft Insurance Center, Inc.

DUE DATE: **11/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**REGISTERED AGENT SOLUTIONS, INC.
7288 HANOVER GREEN DRIVE
MECHANICSVILLE, VA**

SCC ID NO: **F1448218**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	100,000
COMNV	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 823 NORTH ELM STREET

CITY/ST/ZIP: GREENSBORO, NC 27401

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:	DANIEL CRAFT		
TITLE:	PRESIDENT		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WAYLAND V MOORE		
TITLE:	VP & SECRETARY		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	STANLEY PARK		
TITLE:	VICE PRESIDENT		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM E SMITH		
TITLE:	VICE PRESIDENT		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RONALD SYDELL		
TITLE:	VICE PRESIDENT		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID CRAFT		
TITLE:	CEO & TREASURER		
ADDRESS:	823 NORTH ELM STREET		
CITY/ST/ZIP/CO:	GREENSBORO, NC 27401		

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/ DANIEL CRAFT	DANIEL CRAFT, PRESIDENT	10/29/2014
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.		