

SCC eFile  
(6/10)

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212500201

1.) CORPORATION NAME:

**TRIAD INSURANCE MANAGEMENT & SERVICES  
AGENCY, INC.**

DUE DATE: **1/31/2012**

SCC ID NO: **F1457193**

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

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 10,000     |

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**PA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 116 JOHN ROBERT THOMAS DRIVE  
SUITE A

CITY/ST/ZIP: EXTON, PA 19341-

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: JAMES D ONARO  
TITLE: PRES/DIR  
ADDRESS: 116 JOHN ROBERT THOMAS DRIVE  
STE A  
CITY/ST/ZIP/CO: EXTON, PA 19341-

OFFICER

DIRECTOR

NAME: JOSEPH STAZZONE  
TITLE: VP/TREAS/DIR  
ADDRESS: 116 JOHN ROBERT THOMAS DRIVE  
STE A  
CITY/ST/ZIP/CO: EXTON, PA 19341-

OFFICER

DIRECTOR

NAME: LISA A DASCALOFF  
TITLE: VP/AT  
ADDRESS: 116 JOHN ROBERT THOMAS DRIVE  
STE A  
CITY/ST/ZIP/CO: EXTON, PA 19341-

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/ LISA A DASCALOFF

LISA A DASCALOFF, VP/AT

11/23/2011

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.