

1.) CORPORATION NAME:

**COMMERCIAL INSURANCE UNDERWRITERS, INC.**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ELISABETH L ROBERTS  
5630 FLAGLER DRIVE  
CENTREVILLE, VA 20120**

SCC ID NO: **F1468224**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMM	30,000
PREF	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 901 EAST ST. LOUIS ST  
#205

CITY/ST/ZIP: SPRINGFIELD, MO 65806-2537

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:	KIMBERLY D MOORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	439 S. RIVER BIRCH DRIVE		
CITY/ST/ZIP/CO:	SPRINGFIELD, MO 65804		

NAME:	RUTH S ELLEDGE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP-NEW BUSNS/UN		
ADDRESS:	2946 S SCOTTS LN		
CITY/ST/ZIP/CO:	SPRINGFIELD, MO 65807		

NAME:	TAMMY L LOCKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP FINANCE		
ADDRESS:	421 N. PIMA		
CITY/ST/ZIP/CO:	FAIR GROVE, MO 65648		

NAME:	DAVID W HINRICHS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	2906 E LARK ST		
CITY/ST/ZIP/CO:	SPRINGFIELD, MO 65804		

NAME:	BERTRAND G HOULE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	P.O. BOX 80		
CITY/ST/ZIP/CO:	KISSEE MILLS, MO 65680		

NAME:	NICOLE M PASCOE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	682 ROSEMEAD ROAD		
CITY/ST/ZIP/CO:	ROGERSVILLE, MO 65742		

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/ KIMBERLY D MOORE	KIMBERLY D MOORE, PRESIDENT	4/26/2012
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.		