

1.) CORPORATION NAME:

**Petsmarketing Insurance.Com Agency, Inc.**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 1150  
GLEN ALLEN, VA**

SCC ID NO: **F1468984**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**OH**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3840 GREENTREE AVE SW

CITY/ST/ZIP: CANTON, OH 44706

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:	DENNIS C RUSHOVICH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3840 GREENTREE AVE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		
NAME:	CHRISTOPHER R SACHS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3840 GREENTREE AVENUE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		
NAME:	LYNN M THOMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3840 GREENTREE AVENUE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		
NAME:	CHRISTOPHER M CHANEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	3840 GREENTREE AVE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		
NAME:	PATRICIA M ADAMS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3840 GREENTREE AVENUE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		
NAME:	NICHOLAS J LEIGHTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3840 GREENTREE AVENUE SW		
CITY/ST/ZIP/CO:	CANTON, OH 44706		

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/ PATRICIA M ADAMS	PATRICIA M ADAMS, SECRETARY	3/28/2013
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.		