

1.) CORPORATION NAME:

KELLER-STONEBRAKER INSURANCE, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CORPORATION SERVICE COMPANY**
11 S 12TH ST
RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:
MD

DUE DATE: **6/30/2011**

SCC ID NO: **F1473430**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500
PREFER	500

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1120 C PROFESSIONAL CT

CITY/ST/ZIP: HAGERSTOWN, MD 21740-

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 KOHLENSTEIN
TITLE: PRESIDENT
ADDRESS: 3458 ELLICOTT CENTER DRIVE
CITY/ST/ZIP/CO: ELLICOTT CITY, MD 21043-

OFFICER

DIRECTOR

NAME: CHARLES B CHILCOAT, III
TITLE: CFO
ADDRESS: 3458 ELLICOTT CENTER DRIVE
CITY/ST/ZIP/CO: ELLICOTT CITY, MD 21043-

OFFICER

DIRECTOR

NAME: RICHARD L MILEY
TITLE: COB
ADDRESS: 518 E. BROAD ST
CITY/ST/ZIP/CO: COLUMBUS, OH 43215-

OFFICER

DIRECTOR

NAME: JOHN SCHNEBLY
TITLE: CEO
ADDRESS: 1120 C PROFESSIONAL CT
CITY/ST/ZIP/CO: HAGERSTOWN, MD 21740-

OFFICER

DIRECTOR

NAME: KENT RICHARD REYNOLDS
TITLE: CFO
ADDRESS: 1120 C PROFESSIONAL COURT
CITY/ST/ZIP/CO: HAGERSTOWN, MD 21740-

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.

<u>/s/ KENT RICHARD REYNOLDS</u>	<u>KENT RICHARD REYNOLDS, CFO</u>	<u>4/25/2011</u>
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.