

1.) CORPORATION NAME:

USAssure Insurance Services, Inc.

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

SCC ID NO: **F1475757**

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

AUTH IN VI

RALS VA, LLC

7288 HANOVER GREEN DRIVE

MECHANICSVILLE, VA 23111

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5011 GATE PKWY SUITE 150

CITY/ST/ZIP: JACKSONVILLE, FL 32256-

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: JEFFREY M BENSON
TITLE: ASST VP
ADDRESS: 5011 GATE PKWY STE 150
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256-

OFFICER

DIRECTOR

NAME: THOMAS F PETWAY III
TITLE: CHAIRMAN
ADDRESS: 5011 GATE PARKWAY STE 150
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256-

OFFICER

DIRECTOR

NAME: THOMAS F PETWAY IV
TITLE: CEO
ADDRESS: 5011 GATE PKWY STE 150
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256-

OFFICER

DIRECTOR

NAME: ANDREW J FERGUSON
TITLE: PRESIDENT
ADDRESS: 5011 GATE PKWY
STE 150
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256-

OFFICER

DIRECTOR

NAME: CHRISTOPHER F EMANS
TITLE: CFO/SECRETARY
ADDRESS: 5011 GATE PKWY SUITE 150
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32256-

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/ CHRISTOPHER F EMANS
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

CHRISTOPHER F EMANS,
CFO/SECRETARY
PRINTED NAME AND CORPORATE
TITLE

7/25/2011
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.