

| | | | |
|---|--|-------|------------|
| 1.) CORPORATION NAME: AMERICAN EQUINE INSURANCE GROUP, LTD. | DUE DATE: 7/31/2013 | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA | SCC ID NO: F1478074 | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> | CLASS | AUTHORIZED |
| CLASS | AUTHORIZED | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2130 POINT BLVD
SUITE 100

CITY/ST/ZIP: ELGIN, IL 60123

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 J MORRISROE TITLE: PRESIDENT ADDRESS: 2130 POINT BLVD SUITE 100 CITY/ST/ZIP/CO: ELGIN, IL 60123 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|---|--|--|

| | | | |
|---|----------------------------------|--|--|
| NAME: HELEN RUSSEL HART TITLE: DIRECTOR ADDRESS: 2130 POINT BLVD STE 100 CITY/ST/ZIP/CO: ELGIN, IL 60123 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|----------------------------------|--|--|

| | | | |
|---|----------------------------------|--|--|
| NAME: KAREN L HUTCHESON TITLE: DIRECTOR ADDRESS: 2130 POINT BLVD STE 100 CITY/ST/ZIP/CO: ELGIN, IL 60123 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|----------------------------------|--|--|

| | | | |
|---|----------------------------------|--|--|
| NAME: ROGER R HUTCHESON TITLE: DIRECTOR ADDRESS: 2130 POINT BLVD STE 100 CITY/ST/ZIP/CO: ELGIN, IL 60123 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> 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/ MICHAEL J MORRISROE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | MICHAEL J MORRISROE, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 6/17/2013 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.