

1.) CORPORATION NAME:

DUE DATE: **12/31/2011**

Mason & Mason Technology Insurance Services, Inc.

SCC ID NO: **F1493560**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	46,000
PREFER	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 458 SOUTH AVE

CITY/ST/ZIP: WHITMAN, MA 02382-

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: PHILIP W MASON
TITLE: PRESIDENT
ADDRESS: 458 SOUTH AVE
CITY/ST/ZIP/CO: WHITMAN, MA 02382-

OFFICER

DIRECTOR

NAME: DAVID H MASON
TITLE: TREASURER
ADDRESS: 3304 WHITE MOUNTAIN HWY
CITY/ST/ZIP/CO: NORTH CONWAY, NH 03860-

OFFICER

DIRECTOR

NAME: JEANNE M MASON
TITLE: DIRECTOR
ADDRESS: 3304 WHITE MOUNTAIN HWY
CITY/ST/ZIP/CO: NORTH CONWAY, MA 03860-

OFFICER

DIRECTOR

NAME: PHILIP W MASON
TITLE: SECRETARY
ADDRESS: 458 SOUTH AVE
CITY/ST/ZIP/CO: WHITMAN, MA 02382-

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/ PHILIP W MASON

PHILIP W MASON, PRESIDENT

12/13/2011

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.