

1.) CORPORATION NAME:

League Insurance Agency, Inc.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1500075**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CT

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 191 JOHN DOWNEY DRIVE

CITY/ST/ZIP: NEW BRITAIN, CT 06051

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.

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEPHEN W. KOSLOW	
TITLE:	DIRECTOR	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, CT 06051	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Jane M. Chesbro	
TITLE:	PRESIDENT	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, CT 06051	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ANGELA CAMPBELL	
TITLE:	ASST SEC	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, CT 06051	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	STEVEN R. SULESKI	
TITLE:	SECRETARY	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, CT 06051	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Christopher J. Copeland	
TITLE:	TREASURER	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, CT 06051	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ALASTAIR C. SHORE	
TITLE:	DIRECTOR	
ADDRESS:	191 JOHN DOWNEY DRIVE	
CITY/ST/ZIP/CO:	NEW BRITAIN, VA 06051	

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/ ANGELA CAMPBELL	ANGELA CAMPBELL, ASST SEC	1/19/2013
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.		