

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214525431

1.) CORPORATION NAME:

THE BORDEN-PERLMAN INSURANCE AGENCY, INC.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1509407**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2000 LENOX DR
STE 202

CITY/ST/ZIP: LAWRENCEVILLE, NJ 08648

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 checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	DOUGLAS C BORDEN				
TITLE:	PRESIDENT				
ADDRESS:	2000 LENOX DR STE 202				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JEFFREY F PERLMAN				
TITLE:	VP/S				
ADDRESS:	2000 LENOX DR STE 202				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	SANDRA A DEBOSKEY				
TITLE:	VICE PRESIDENT				
ADDRESS:	2000 LENOX DR STE 202				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	KELLY L MYERS				
TITLE:	VICE PRESIDENT				
ADDRESS:	2000 LENOX DR STE 202				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	RICHARD P PERLMAN				
TITLE:	VICE PRESIDENT				
ADDRESS:	2000 LENOX DR STE 202				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648				

NAME:	JULIENNE A DISANTO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2000 LENOX DRIVE, SUITE 202		
CITY/ST/ZIP/CO:	LAWRENCEVILLE, NJ 08648		

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/ JULIENNE A DISANTO	JULIENNE A DISANTO,	5/15/2014
_____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	_____ TREASURER 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.