

1.) CORPORATION NAME:

B & H INSURANCE SERVICES, INC.

DUE DATE: **2/29/2012**

SCC ID NO: **F1518887**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX ROAD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 470 W. HANES MILL RD STE 100

CITY/ST/ZIP: WINSTON-SALEM, NC 27105-

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: HARRY G GRUBBS
TITLE: PRESIDENT
ADDRESS: PO BOX 11166
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27116-1166

OFFICER

DIRECTOR

NAME: BARBARA A GRUBBS
TITLE: S/T
ADDRESS: PO BOX 11166
CITY/ST/ZIP/CO: WINSTON SALEM, NC 27116-1166

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/ BARBARA A GRUBBS

BARBARA A GRUBBS, S/T

1/18/2012

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.