

1.) CORPORATION NAME:

GMAC Insurance Marketing, Inc.

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1521956**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MO

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 WEST FIFTH STREET

CITY/ST/ZIP: WINSTON-SALEM, NC 27101-2728

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.

<p>NAME: Byron Storms TITLE: PRESIDENT ADDRESS: 500 WEST FIFTH STREET CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-2728</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Gregory Bland TITLE: PRESIDENT ADDRESS: 500 West FIFTH ST CITY/ST/ZIP/CO: WINSTON SALEM, NC 27101</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DONALD J BOLAR TITLE: VICE PRESIDENT ADDRESS: 500 WEST FIFTH STREET CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-2728</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL H WEINER TITLE: CFO ADDRESS: 59 Maiden Lane CITY/ST/ZIP/CO: New York, NY 10038</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Herbert Lemmer TITLE: ASST SECRETARY ADDRESS: 59 Maiden Lane CITY/ST/ZIP/CO: New York, NY 10038</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: George Hall, Jr TITLE: VICE PRESIDENT ADDRESS: 500 West Fifth Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: Brenda Castellano TITLE: VICE PRESIDENT ADDRESS: 500 West Fifth Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Barry Karfunkel TITLE: DIRECTOR ADDRESS: 59 Maiden Lane CITY/ST/ZIP/CO: New York, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Duane Peralta TITLE: VICE PRESIDENT ADDRESS: 500 West Fifth Street CITY/ST/ZIP/CO: Winston-Salem, NC 27101	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Peter Rendall TITLE: TREASURER ADDRESS: 59 Maiden Lane CITY/ST/ZIP/CO: New York, NY 10038	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Jeffrey Weissmann TITLE: SECRETARY ADDRESS: 59 Maiden Lane CITY/ST/ZIP/CO: New York, NY 10038	<input checked="" type="checkbox"/> OFFICER	<input 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/ Jeffrey Weissmann SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Jeffrey Weissmann, SECRETARY PRINTED NAME AND CORPORATE TITLE	8/17/2012 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.		