

1.) CORPORATION NAME:

Associated Insurance Management, Inc.

DUE DATE: **6/30/2011**

SCC ID NO: **F1527870**

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

AUTH IN VI

**STEVEN A MICHAEL PLLC
1950 OLD GALLOWS RD STE 700
VIENNA, VA 22182**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8120 FENTON ST STE 300

CITY/ST/ZIP: SILVER SPRING, MD 20910-

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: JOHN J SCOTT
TITLE: PRESIDENT
ADDRESS: 8120 FENTON ST STE 300
CITY/ST/ZIP/CO: SILVER SPRING, MD 20910-

OFFICER

DIRECTOR

NAME: LEONARD P. MARINACCIO
TITLE: VICE PRESIDENT
ADDRESS: 8120 FENTON STREET, SUITE 300
CITY/ST/ZIP/CO: SILVER SPRING, MD 20910-

OFFICER

DIRECTOR

NAME: MARVIN LEVINE
TITLE: SECRETARY
ADDRESS: 8120 FENTON STREET, SUITE 300
CITY/ST/ZIP/CO: SILVER SPRING, MD 20910-

OFFICER

DIRECTOR

NAME: MARCEL BERNARD
TITLE: TREASURER
ADDRESS: 8120 FENTON ST STE 300
CITY/ST/ZIP/CO: SILVER SPRING, MD 20910-

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/ LEONARD P. MARINACCIO
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

LEONARD P. MARINACCIO, VICE
PRESIDENT
PRINTED NAME AND CORPORATE
TITLE

7/21/2011
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.