

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214511288
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1.) CORPORATION NAME: <b>PTZ Insurance Agency, Ltd.</b>	DUE DATE: <b>3/31/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX ROAD, SUITE 285          GLEN ALLEN, VA</b>	SCC ID NO: <b>F1562026</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>IL</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3315 E ALGONQUIN ROAD  
SUITE 450

CITY/ST/ZIP: ROLLING MEADOWS, IL 60008

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: EDWARD MARK WARREN TITLE: P/CEO ADDRESS: 710 DORVAL DRIVE SUITE 400 CITY/ST/ZIP/CO: , , FN		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GLEN TENNISON TITLE: CFO ADDRESS: 710 DORVAL DRIVE STE 400 CITY/ST/ZIP/CO: , , FN		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: BARRY JAMES HEROLD TITLE: OFFICER ADDRESS: 3315 E ALGONQUIN ROAD #450 CITY/ST/ZIP/CO: ROLLING MEADOWS, IL 60008		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JOHN G WARDEN TITLE: OFFICER ADDRESS: 710 DORVAL DRIVE #400 CITY/ST/ZIP/CO: , , FN		

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/ GLEN TENNISON	GLEN TENNISON, CFO	2/28/2014
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.