

1.) CORPORATION NAME:

INTREPID INSURANCE COMPANY

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD SUITE 301 GLEN ALLEN, VA 23060-6802**

DUE DATE: **12/30/2010**

SCC ID NO: **F1571704**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
MI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 36455 CORPORATE DRIVE

CITY/ST/ZIP: FARMINGTON HILLS, MI 48831-

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: A HINRICHS
TITLE: PRESIDENT
ADDRESS: 36455 CORPORATE DRIVE
CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-

OFFICER

DIRECTOR

NAME: S C POLING
TITLE: VICE PRESIDENT
ADDRESS: 36455 CORPORATE DRIVE
CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-

OFFICER

DIRECTOR

NAME: M.E. ROY
TITLE: SECRETARY
ADDRESS: 36455 CORPORATE DRIVE
CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-

OFFICER

DIRECTOR

NAME: CHRISTOPHER WEINIG
TITLE: PRESIDENT
ADDRESS: 36455 CORPORATE DRIVE
CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-

OFFICER

DIRECTOR

NAME: A SINGHAL
TITLE: DIRECTOR
ADDRESS: 36455 CORPORATE DRIVE
CITY/ST/ZIP/CO: FARMINGTON HILLS, MI 48331-

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/ S C POLING	S C POLING, VICE PRESIDENT	12/17/2010
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.