

1.) CORPORATION NAME:

DUE DATE: **5/31/2014**

Ohio National Insurance Agency, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1589151**

**WILLIAM K LEWIS
701 E FRANKLIN STE 1200
RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

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

4.) STATE OR COUNTRY OF INCORPORATION:
OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE FINANCIAL WAY

CITY/ST/ZIP: CINCINNATI, OH 45242

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:	TERRY L GARRARD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3823 DRAKEWOOD DRIVE		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45209		
NAME:	BARBARA TURNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREAS/VPR		
ADDRESS:	7990 PLANTATION DR		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	MICHAEL F HAVERKAMP	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	6667 GREENOAK DR		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45248		
NAME:	JEFFERY A. BLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CH. COMPL OFF.		
ADDRESS:	5789 CEDARD RIDGE CT.		
CITY/ST/ZIP/CO:	LIBERTY TOWNSHIP, OH 45044		
NAME:	CLETUS L DAVIS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TAX OFFICER		
ADDRESS:	472 CHERRY HILL LN		
CITY/ST/ZIP/CO:	LEBANON, OH 45036		
NAME:	KIMBERLY A. PLANTE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	6765 LE CONTE AVE		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45230		

NAME:	John Del Pozzo	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9773 Farmstead Drive		
CITY/ST/ZIP/CO:	Loveland, OH 45140		

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.

<u>/s/ TERRY L GARRARD</u>	<u>TERRY L GARRARD, VICE</u>	<u>4/30/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.