

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214545704				
1.) CORPORATION NAME: <b>R. T. BEERS &amp; COMPANY INSURANCE SERVICES, INC.</b>		DUE DATE: <b>8/31/2014</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>F1596511</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>CA</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 111 W OCEAN BLVD SUITE 1500  CITY/ST/ZIP: LONG BEACH, CA 90802						
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: RALPH T BEERS TITLE: CEO ADDRESS: 111 W OCEAN BLVD STE 1500 CITY/ST/ZIP/CO: LONG BEACH, CA 90802		<input checked="" type="checkbox"/> OFFICER <input checked="" 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/ RALPH T BEERS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RALPH T BEERS, CEO PRINTED NAME AND CORPORATE TITLE	10/3/2014 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.						