

1.) CORPORATION NAME:

DUE DATE: **10/31/2012**

Royal & SunAlliance Insurance Agency, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1602970**

**BEVERLEY L CRUMP
Bank of America Center, 16th Floor
1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: WALL ST PLAZA
88 PINE ST 17TH FL

CITY/ST/ZIP: NEW YORK, NY 10005

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:	ALISON MONCUR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIR		
ADDRESS:	45 WILRIDGE RD		
CITY/ST/ZIP/CO:	WILTON, CT 06897		

NAME:	FERNANDO CONCHA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/DIR		
ADDRESS:	755 HARBOUR DR		
CITY/ST/ZIP/CO:	KEY BISCAYNE, FL 33149		

NAME:	SIMON WETHERED	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/DIR		
ADDRESS:	84 RIVER RD		
CITY/ST/ZIP/CO:	MONTVILLE, NJ 07045		

NAME:	SHELLY JENKS HENGSTELER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	T/S/DIR		
ADDRESS:	6981 HAMPTON CT		
CITY/ST/ZIP/CO:	CASTLE ROCK, CO 80108		

NAME:	DAVID BROOME	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	FUJIYA TEMPLE WAY		
CITY/ST/ZIP/CO:	BUCKS,,S123HE,UNITED KINGDOM (GREAT BRITAIN) , , FN		

NAME:	PAUL GREENSMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4 DEVON CRESCENT, REDHILL		
	SURREY,,RH16BB,UNITED KINGDOM (GREAT BRITAIN)		
CITY/ST/ZIP/CO:	, , FN		

NAME:	STEWART KAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	101 LOWER RD		
	CHALFONT, ST. PETER, GERRARDS CROSS,		
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/ SHELLY JENKS HENGSTELER	SHELLY JENKS HENGSTELER,	9/5/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	T/S/DIR 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.