

1.) CORPORATION NAME:

**M-J Insurance Agency, Inc. (USED IN VA BY: M-JINSURANCE, INC.)**

DUE DATE: **12/31/2015**

SCC ID NO: **F1610353**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER, 16TH FLOOR  
1111 EAST MAIN STREET**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	1,000
COMBNV	9,000

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9225 PRIORITY WAY W DRIVE  
STE 100

CITY/ST/ZIP: INDIANAPOLIS, IN 46240

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:	JON E LOFTIN	
TITLE:	PRESIDENT	
ADDRESS:	9225 PRIORITY WAY W DRIVE STE 100	
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAN R BEDNARZ	
TITLE:	VICE PRESIDENT	
ADDRESS:	9225 PRIORITY WAY W DRIVE STE 100	
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	J COLIN MACNAB	
TITLE:	VICE PRESIDENT	
ADDRESS:	9225 PRIORITY WAY W DRIVE STE 100	
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	EDWARD L MOURNIGHAN	
TITLE:	VICE PRESIDENT	
ADDRESS:	9225 PRIORITY WAY W DRIVE STE 100	
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BRIAN P FRIEND	
TITLE:	VP-FINANCE	
ADDRESS:	9225 PRIORITY WAY W DRIVE STE 100	
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240	

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/ BRIAN P FRIEND	BRIAN P FRIEND, VP-FINANCE	11/16/2015
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.