

1.) CORPORATION NAME:

Insurance Office of America, Inc.

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**INCORP SERVICES INC
7288 HANOVER GREEN DRIVE
MECHANICSVILLE, VA**

SCC ID NO: **F1612623**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	750,000
COMNV	750,000

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1855 W STATE RD 434

CITY/ST/ZIP: LONGWOOD, FL 32750

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.

<p>NAME: JEFFREY LAGOS TITLE: PRESIDENT ADDRESS: 1855 W STATE RD 434 CITY/ST/ZIP/CO: LONGWOOD, FL 32750</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MARY LAWLESS TITLE: COO ADDRESS: 1855 W STATE RD 434 CITY/ST/ZIP/CO: LONGWOOD, FL 32750</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: HEATH RITENOUR TITLE: CEO ADDRESS: 1855 WEST SR 434 CITY/ST/ZIP/CO: LONGWOOD, FL 32750</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JOHN RITENOUR TITLE: DIRECTOR ADDRESS: 1855 W STATE RD 434 CITY/ST/ZIP/CO: LONGWOOD, FL 32750</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: WESLEY D SCOVANNER TITLE: DIRECTOR ADDRESS: 1855 W STATE RD 434 CITY/ST/ZIP/CO: LONGWOOD, FL 32750</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Jay Grevers TITLE: CFO ADDRESS: 1855 West SR 434 CITY/ST/ZIP/CO: Longwood, FL 32750</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	John Wick	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1855 West SR 434		
CITY/ST/ZIP/CO:	Longwood, FL 32750		

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/ Jay Grevers	Jay Grevers, CFO	11/8/2013
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.