

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215512829				
1.) CORPORATION NAME: <b>Ryan-St. Marie Insurance Agency, Inc.</b>		DUE DATE: <b>4/30/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>3H AGENT SERVICES INC          2121 EISENHOWER AVE STE 251          ALEXANDRIA, VA</b>		SCC ID NO: <b>F1623109</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ALEXANDRIA CITY</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>850</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	850
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COMMON	850					
4.) STATE OR COUNTRY OF INCORPORATION: <b>OH</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 123 REASER CT  CITY/ST/ZIP: ELYRIA, OH 44035						
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: JOHN M RYAN TITLE: PRES/SEC/TREAS ADDRESS: 123 REASER CT CITY/ST/ZIP/CO: ELYRIA, OH 44035		<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/ JOHN M RYAN	JOHN M RYAN, PRES/SEC/TREAS	4/2/2015				
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.						