

1.) CORPORATION NAME:

**WEH Insurance Agency, Inc.**

DUE DATE: **8/31/2011**

SCC ID NO: **F1718875**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3339 N HIGHLAND AVE

CITY/ST/ZIP: JACKSON, TN 38305-

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: WILLIAM E HOPKINS II  
TITLE: PRESIDENT  
ADDRESS: 3339 N HIGHLAND AVE  
CITY/ST/ZIP/CO: JACKSON, TN 38305-

OFFICER

DIRECTOR

NAME: ANN F HOPKINS  
TITLE: DIRECTOR  
ADDRESS: 3339 N HIGHLAND AVE  
CITY/ST/ZIP/CO: JACKSON, TN 38305-

OFFICER

DIRECTOR

NAME: GEORGE THOMAS ALLEN, III  
TITLE: TREASURER  
ADDRESS: 3339 NORTH HIGHLAND AVE.  
CITY/ST/ZIP/CO: JACKSON, TN 38305-

OFFICER

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/ GEORGE THOMAS ALLEN, III  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

GEORGE THOMAS ALLEN, III,  
TREASURER  
PRINTED NAME AND CORPORATE  
TITLE

9/27/2011

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.