

SCC eFile

**2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

212540174

1.) CORPORATION NAME:

AEGIS INSURANCE SERVICES, INC.

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1730920**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|-------|------------|
| COMA | 50,000 |
| COMB | 50,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

GA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5755 NORTH POINT PARKWAY
SUITE 44

CITY/ST/ZIP: ALPHARETTA, GA 30022

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: | SCOTT C STEVENS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | OFFICER | | |
| ADDRESS: | 260 COTTON FIELD CT | | |
| CITY/ST/ZIP/CO: | ALPHARETTA, GA 30022 | | |

| | | | |
|-----------------|----------------------|---|--|
| NAME: | BARBARA F STEVENS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | OFFICER | | |
| ADDRESS: | 260 COTTON FIELD CT | | |
| CITY/ST/ZIP/CO: | ALPHARETTA, GA 30022 | | |

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/ BARBARA F STEVENS | BARBARA F STEVENS, OFFICER | 10/18/2012 |
| 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.