

SCC eFile  
(6/10)

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212501308

1.) CORPORATION NAME:

**Leisman Insurance Agency, Inc.**

DUE DATE: **1/31/2012**

SCC ID NO: **F1733379**

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

**AUTH IN VI**

**NATIONAL REGISTERED AGENTS INC**

**4001 North Ninth Street, Suite 227**

**ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	15,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 800 SOUTH ST STE 650

CITY/ST/ZIP: WALTHAM, MA 02453-

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 F LEISMAN III  
TITLE: PRESIDENT  
ADDRESS: 800 SOUTH ST STE 650  
CITY/ST/ZIP/CO: WALTHAM, MA 02453-

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/ WILLIAM F LEISMAN III  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

WILLIAM F LEISMAN III,  
PRESIDENT  
PRINTED NAME AND CORPORATE  
TITLE

12/30/2011

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.