

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214512558						
1.) CORPORATION NAME: Casswood Insurance Agency, Ltd.		DUE DATE: 4/30/2014						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL REGISTERED AGENTS INC 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA		SCC ID NO: F1746421						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY		5.) STOCK INFORMATION						
4.) STATE OR COUNTRY OF INCORPORATION: NY		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td>500</td> </tr> <tr> <td>PREFER</td> <td>200</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	500	PREFER	200
CLASS	AUTHORIZED							
COMA	500							
PREFER	200							
6.) PRINCIPAL OFFICE ADDRESS:								
ADDRESS: 5 EXECUTIVE PARK DRIVE								
CITY/ST/ZIP: CLIFTON PARK, NY 12065								
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: NEIL M CASTRO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: PRES/COO/DTR								
ADDRESS: 5 EXECUTIVE PARK DRIVE								
CITY/ST/ZIP/CO: CLIFTON PARK, NY 12065								
NAME: DOROTHY SHIELDS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: SECRETARY								
ADDRESS: 5 EXECUTIVE PARK DRIVE								
CITY/ST/ZIP/CO: CLIFTON PARK, NY 12065								
NAME: JEFFREY W WODICKA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: DTR/CEO/CHM								
ADDRESS: 5 EXECUTIVE PARK DRIVE								
CITY/ST/ZIP/CO: CLIFTON PARK, NY 12065								
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/ NEIL M CASTRO	NEIL M CASTRO, PRES/COO/DTR	3/7/2014						
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.								