

SCC eFile

**2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

215523710

1.) CORPORATION NAME:

TRX INSURANCE SERVICES, INC.

DUE DATE: **5/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RICHARD G METZ
211 N UNION ST
ALEXANDRIA, VA**

SCC ID NO: **F1753724**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1288 VALLEY FORGE RD UNIT 85
PO BOX 987

CITY/ST/ZIP: VALLEY FORGE, PA 19482

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:	RICHARD G METZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/D		
ADDRESS:	1288 VALLEY FORGE RD UNIT 85		
	PO BOX 987		
CITY/ST/ZIP/CO:	VALLEY FORGE, PA 19482		

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/ RICHARD G METZ	RICHARD G METZ, P/D	6/23/2015
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.