

1.) CORPORATION NAME:

SML Agency Services, Inc.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1754409**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 100 COURT STREET

CITY/ST/ZIP: BINGHAMTON, NY 13902

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.

<p>NAME: JAMES J KERWIN TITLE: PRESIDENT ADDRESS: 100 COURAL STE CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: BART P BOZZI TITLE: VICE PRESIDENT ADDRESS: 100 COURT STREET CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JAMES P CONLON TITLE: VICE PRESIDENT ADDRESS: 100 COURT ST CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: KEVIN J MCKEOWN TITLE: TREASURER ADDRESS: 100 COURT STREET CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: F. DAVID MISTRETTA TITLE: SECRETARY ADDRESS: 100 COURT STREET CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: BRUCE W BOYEA TITLE: DIRECTOR ADDRESS: 100 COURT STREET CITY/ST/ZIP/CO: BINGHAMTON, NY 13902</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: FREDERICK L WORTMAN OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 100 COURT STREET
CITY/ST/ZIP/CO: BINGHAMTON, NY 13902

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.

<u>/s/ JAMES P CONLON</u>	<u>JAMES P CONLON, VICE</u>	<u>4/9/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.