

1.) CORPORATION NAME:

DUE DATE: **2/28/2011**

Associations Insurance Agency, Inc.

SCC ID NO: **F1780602**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
TX

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5401 N CENTRAL EXPWY #200

CITY/ST/ZIP: DALLAS, TX 75205-

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: DANA HODGE
TITLE: VICE PRESIDENT
ADDRESS: 5401 N CENTRAL EXPWY #200
CITY/ST/ZIP/CO: DALLAS, TX 75205-

OFFICER

DIRECTOR

NAME: JOHN CARONA
TITLE: DIRECTOR
ADDRESS: 5401 N CETNRAL EXPWY #300
CITY/ST/ZIP/CO: DALLAS, TX 75205-

OFFICER

DIRECTOR

NAME: PAUL REYES
TITLE: SECRETARY
ADDRESS: 5401 N CENTRAL EXPWY #300
CITY/ST/ZIP/CO: DALLAS, TX 75205-

OFFICER

DIRECTOR

NAME: HELEN EDEN
TITLE: PRES/DIRECTOR
ADDRESS: 5401 N CENTRAL EXPWY #300
CITY/ST/ZIP/CO: DALLAS, TX 75205-

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/ PAUL REYES

PAUL REYES, SECRETARY

2/7/2011

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.