

1.) CORPORATION NAME:

**COLLECTOR'S INSURANCE AGENCY, INCORPORATED**

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1782491**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4040 West 70th Street

CITY/ST/ZIP: Edina, MN 55435

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: Leslie Bender<br/>TITLE: PRESIDENT<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p>         | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| <p>NAME: Timothy Mabry<br/>TITLE: TREASURER<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p>         | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| <p>NAME: Janis St. Martin<br/>TITLE: VICE PRESIDENT<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p> | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| <p>NAME: Patrick Morris<br/>TITLE: CEO<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p>              | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| <p>NAME: Debra Ciskey<br/>TITLE: DIRECTOR<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p>           | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: Kristina Warmka<br/>TITLE: Other Officer<br/>ADDRESS: 4040 West 70th Street<br/>CITY/ST/ZIP/CO: Edina, MN 55435</p>   | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> 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/ Kristina Warmka  | Kristina Warmka, Other Officer   | 1/17/2013 |
| 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. |                                  |           |