

SCC eFile

**2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

212521863

1.) CORPORATION NAME:

**Maersk Agency U.S.A., Inc.**

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1795295**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2 GIRALDA FARMS  
MADISON AVENUE

CITY/ST/ZIP: MADISON, NJ 07940

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEVEN GILBERT	
TITLE:	VICE PRESIDENT	
ADDRESS:	2 GIRALDA FARMS	
CITY/ST/ZIP/CO:	MADISON, NJ 07940	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BO SONNICHSEN	
TITLE:	TREASURER	
ADDRESS:	2 GIRALDA FARMS	
CITY/ST/ZIP/CO:	MADISON, NJ 07940	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL O'ROURKE	
TITLE:	SECRE	
ADDRESS:	2 GIRALDA FARMS	
CITY/ST/ZIP/CO:	MADISON, NJ 07940	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS SPROAT	
TITLE:	VICE PRESIDENT	
ADDRESS:	2 GIRALDA FARMS MADISON AVENUE	
CITY/ST/ZIP/CO:	MADISON, NJ 07940	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CRAIG MYGATT	
TITLE:	VICE PRESIDENT	
ADDRESS:	9300 ARROWPOINT BLVD	
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28273	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RUSSELL BRUNER	
TITLE:	DIRECTOR	
ADDRESS:	2 GIRALDA FARMS MADISON AVENUE	
CITY/ST/ZIP/CO:	MADISON, NJ 07940	

NAME:	GORDON DORSEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1530 WILSON BLVD		
CITY/ST/ZIP/CO:	SUITE 650 ARLINGTON, VA 22209		

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/ MICHAEL O'ROURKE	MICHAEL O'ROURKE, SECRE	6/12/2012
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.