

1.) CORPORATION NAME:

DUE DATE: **8/31/2012**

**Renaissance Insurance Agency, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1798471**

**3H AGENT SERVICES INC  
2121 EISENHOWER AVE STE 251  
ALEXANDRIA, VA 22314**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ALEXANDRIA CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1437 SEVENTH ST.  
FOURTH FLOOR

CITY/ST/ZIP: SANTA MONICA, CA 90401

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:	NICOLE JONES-GYLLSTROM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1437SEVENTH ST.		
CITY/ST/ZIP/CO:	SANTA MONICA, CA 90401		

NAME:	NEIL SCOTT MAJORS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, OPERATIONS		
ADDRESS:	1437 SEVENTH ST.		
CITY/ST/ZIP/CO:	FOURTH FLOOR SANTA MONICA, CA 90401		

NAME:	KENNETH LEE NELSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP CLIENT SERV.		
ADDRESS:	1437 SEVENTH ST.		
CITY/ST/ZIP/CO:	FOURTH FLOOR SANTA MONICA, CA 90401		

NAME:	ROBERT SAMUEL SCHNEIDER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2345 GRAND BLVD., STE 610		
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64108		

NAME:	JAMES H INGRAHAM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2345 GRAND BLVD., STE 610		
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64108		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROY DAVID LANDSTROM CHAIRMAN 1437 SEVENTH ST. FOURTH FLOOR SANTA MONICA, CA 90401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEONARD P. KLINE, JR. DIRECTOR 2345 GRAND BLVD., STE. 610 KANSAS CITY, MO 64108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ JAMES H INGRAHAM SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JAMES H INGRAHAM, SECRETARY PRINTED NAME AND CORPORATE TITLE	2/4/2013 DATE
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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.