

SCC eFile

2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

216514118

1.) CORPORATION NAME:

**JACKSON, DIEKEN & ASSOCIATES INSURANCE
AGENCY, INC.**

DUE DATE: **5/31/2016**

SCC ID NO: **F1824137**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BUSINESS FILINGS INCORPORATED
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	750

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 27893 CLEMENS RD

CITY/ST/ZIP: WESTLAKE, OH 44145

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: ROBERT E JACKSON
 TITLE: P/S
 ADDRESS: 27893 CLEMENS RD
 CITY/ST/ZIP/CO: WESTLAKE, OH 44145

OFFICER

DIRECTOR

NAME: DOUGLAS DIEKEN
 TITLE: VICE PRESIDENT
 ADDRESS: 27893 CLEMENS ROAD
 CITY/ST/ZIP/CO: WESTLAKE, OH 44145

OFFICER

DIRECTOR

NAME: LINDA O. JACKSON
 TITLE: TREASURER
 ADDRESS: 27893 CLEMENS ROAD
 CITY/ST/ZIP/CO: WESTLAKE, OH 44145

OFFICER

DIRECTOR

NAME: ROBERT E JACKSON
 TITLE: DIRECTOR
 ADDRESS: 27893 CLEMENS RD
 CITY/ST/ZIP/CO: WESTLAKE, OH 44145

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/ ROBERT E JACKSON

ROBERT E JACKSON, P/S

4/18/2016

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.