

SCC eFile

**2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

215520970

1.) CORPORATION NAME:

**Grosslight Insurance Agency, Inc. (USED IN VA**

**BY:GROSSLIGHT INSURANCE, INC.)**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER, 16TH FLOOR  
1111 EAST MAIN STREET**

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CA**

DUE DATE: **5/31/2015**

SCC ID NO: **F1826397**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	7,500

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1333 WESTWOOD BLVD

CITY/ST/ZIP: LOS ANGELES, CA 90024

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:	GILBERT GROSSLIGHT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1333 WESTWOOD BLVD		
CITY/ST/ZIP/CO:	LOS ANGELES, CA 90024		

NAME:	DONA GROSSLIGHT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1333 WESTWOOD BLVD		
CITY/ST/ZIP/CO:	LOS ANGELES, CA 90024		

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.

<u>/s/ GILBERT GROSSLIGHT</u>	<u>GILBERT GROSSLIGHT,</u>	<u>5/28/2015</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.