

1.) CORPORATION NAME:

DUE DATE: **10/31/2013**

B.F. Saul Insurance Agency of Md., Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1838707**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7501 WISCONSIN AVE STE 1500

CITY/ST/ZIP: BETHESDA, MD 20814

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 type="checkbox"/> DIRECTOR
NAME: BURKE HAYES		
TITLE: PRESIDENT		
ADDRESS: 7501 WISCONSIN AVE STE 1500		
CITY/ST/ZIP/CO: BETHESDA, MD 20814		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: B FRANCIS SAUL III		
TITLE: SNR VP		
ADDRESS: 7501 WISCONSIN AVE		
CITY/ST/ZIP/CO: STE 1500E BETHESDA, MD 20814		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JOEL A. FRIEDMAN		
TITLE: TREASURER		
ADDRESS: 7501 WISCONSIN AVE		
CITY/ST/ZIP/CO: STE 1500E BETHESDA, MD 20814		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: B FRANCIS SAUL II		
TITLE: CHRMN		
ADDRESS: 7501 WISCONSIN AVE		
CITY/ST/ZIP/CO: STE 1500E BETHESDA, MD 20814		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS H MCCORMICK		
TITLE: Senior VP		
ADDRESS: 7501 WISCONSIN AVENUE		
CITY/ST/ZIP/CO: SUITE 1500E BETHESDA, MD 20814		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jessica L. Parker		
TITLE: DIRECTOR		
ADDRESS: 7501 Wisconsin Avenue		
CITY/ST/ZIP/CO: Suite 1500 E Bethesda, MD 20814		

NAME: Clyde R Dismukes TITLE: Senior VP ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Christopher H. Connolly TITLE: Senior VP ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Merle F. Sustersich TITLE: SECRETARY ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Scott G. Armstrong TITLE: VICE PRESIDENT ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Timothy S. Gillen TITLE: VICE PRESIDENT ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: J. Craig Hamilton TITLE: VICE PRESIDENT ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: David H. Schwarz TITLE: Asst VP ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Shari A. Muldrow TITLE: Asst VP ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Kimberley J Anderson TITLE: ASST SECRETARY ADDRESS: 7501 Wisconsin Avenue Suite 1500 E CITY/ST/ZIP/CO: Bethesda, MD 20814	<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/ Merle F. Sustersich SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Merle F. Sustersich, PRINTED NAME AND CORPORATE TITLE	9/4/2013 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.