

1.) CORPORATION NAME:

**A S & G CLAIMS ADMINISTRATION, INC.**

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DAVID STRAETEN  
192 BALLARD CT #401  
VIRGINIA BEACH, VA 23462**

SCC ID NO: **F1842352**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5300 HOLLISTER STE 410

CITY/ST/ZIP: HOUSTON, TX 77040

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.

<p>NAME: JAMES ABERCROMBIE TITLE: PRESIDENT ADDRESS: 5300 HOLLISTER STE 410 CITY/ST/ZIP/CO: HOUSTON, TX 77040</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: WANDA BROWNING TITLE: VICE PRESIDENT ADDRESS: 5300 HOLLISTER STE 410 CITY/ST/ZIP/CO: HOUSTON, TX 77040</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Leslie A Himes TITLE: Treasurer ADDRESS: 5300 Hollister Suite 410 CITY/ST/ZIP/CO: Houston, TX 77040</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Monica Abercrombie TITLE: Secretary ADDRESS: 5300 Hollister Suite 400 CITY/ST/ZIP/CO: Houston, TX 77040</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Christopher Schaffer TITLE: DIRECTOR ADDRESS: 3227 Walter Dr. Ste C1 CITY/ST/ZIP/CO: Charleston, SC 29455</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Jarrod Reeves TITLE: DIRECTOR ADDRESS: 1700 Pacific Suite 2425 CITY/ST/ZIP/CO: Dallas, TX 75201</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	Dave Straeten	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	192 Ballard Crt. #401		
CITY/ST/ZIP/CO:	Virginia Beach, VA 23462		

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/ Leslie A Himes	Leslie A Himes, Treasurer	10/30/2012
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.