

1.) CORPORATION NAME:

**Logwood Insurance Agency, Inc.**

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1849373**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2330 N. LOOP 1604 W

CITY/ST/ZIP: SAN ANTONIO, TX 78248-4512

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 checked="" type="checkbox"/> DIRECTOR
NAME:	TIMOTHY A. WATT	
TITLE:	PRESIDENT	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WARREN A. STOKES	
TITLE:	VICE PRESIDENT	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SUSAN P. LABRIE	
TITLE:	VICE PRESIDENT	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WARREN A. STOKES	
TITLE:	TREASURER	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SHANNON P. MORALEZ	
TITLE:	ASST SECRETARY	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS COYT WEBB	
TITLE:	SECRETARY	
ADDRESS:	P.O. BOX 33240	
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78265	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID S. ZACHRY DIRECTOR P.O. BOX 33240 SAN ANTONIO, TX 78265	<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/ WARREN A. STOKES	WARREN A. STOKES, VICE PRESIDENT	1/6/2014
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.