

1.) CORPORATION NAME:

LOESEL-SCHAAF INSURANCE AGENCY, INC.

DUE DATE: **2/29/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

**RICHARD L DERRICO
PROFESSIONAL ARTS BLDG
30 FRANKLIN RD SW STE 200**

SCC ID NO: **F1850702**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

ROANOKE, VA 24011

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ROANOKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3537 WEST 12TH ST

CITY/ST/ZIP: ERIE, PA 16505-

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.

OFFICER

DIRECTOR

NAME: DOUGLAS LOESEL
TITLE: PRES/CEO/TREAS
ADDRESS: 3537 WEST 12TH ST
CITY/ST/ZIP/CO: ERIE, PA 16505-

OFFICER

DIRECTOR

NAME: KATHY ARANYOS
TITLE: ASST VP
ADDRESS: 3537 W 12TH ST
CITY/ST/ZIP/CO: ERIE, PA 16505-

OFFICER

DIRECTOR

NAME: ERIC CONSIGLIO
TITLE: VICE PRESIDENT
ADDRESS: 3537 W 12TH ST
CITY/ST/ZIP/CO: ERIE, PA 16505-

OFFICER

DIRECTOR

NAME: MICHAEL BEUCHERT
TITLE: VICE PRESIDENT
ADDRESS: 3537 WEST 12TH STREET
CITY/ST/ZIP/CO: ERIE, PA 16505-

OFFICER

DIRECTOR

NAME: EDWARD ALTHOF
TITLE: VICE PRESIDENT
ADDRESS: 3537 WEST 12TH STREET
CITY/ST/ZIP/CO: ERIE, PA 16505-

NAME: JOSEPH PARLAK TITLE: PRESIDENT ADDRESS: 3537 WEST 12TH STREET CITY/ST/ZIP/CO: ERIE, PA 16505-	<input checked="" type="checkbox"/> OFFICER	<input checked="" 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/ DOUGLAS LOESEL	DOUGLAS LOESEL,	1/18/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRES/CEO/TREAS 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.