

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213532719

1.) CORPORATION NAME:

Freeway Insurance Services of New York, Inc.

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 E MAIN ST**

SCC ID NO: **F1866195**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7711 CENTER AVENUE
SUITE 200

CITY/ST/ZIP: HUNTINGTON BEACH, CA 92647

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:	JEFFERY WINGATE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	7711 CENTER AVENUE		
	SUITE 200		
CITY/ST/ZIP/CO:	HUNTINGTON BEACH, CA 92647		

NAME:	ROD ANAVIM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	7711 CENTER AVENUE		
	SUITE 200		
CITY/ST/ZIP/CO:	HUNTINGTON BEACH , CA 92647		

NAME:	MARTIN ROTHBERG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	7711 CENTER AVENUE		
	SUITE 200		
CITY/ST/ZIP/CO:	HUNTINGTON BEACH , CA 92647		

NAME:	JOSEPH WAKED	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	7711 CENTER AVENUE		
	SUITE 200		
CITY/ST/ZIP/CO:	HUNTINGTON BEACH, CA 92647		

NAME:	VALERIA RICO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CSO		
ADDRESS:	7711 CENTER AVENUE		
	SUITE 200		
CITY/ST/ZIP/CO:	HUNTINGTON BEACH , CA 92647		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT TREBING COO 7711 CENTER AVENUE SUITE 200 HUNTINGTON BEACH, CA 92647	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRENT ANDERSON CONTROLLER 7711 CENTER ANENUE SUITE 200 HUNTINGTON BEACH, CA 92647	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NORM HUDSON COO 7711 CENTER AVENUE SUITE 200 HUNTINGTON BEACH, CA 92647	<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/ ROD ANAVIM	ROD ANAVIM, SECRETARY	7/15/2013	
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.			