

1.) CORPORATION NAME:

THORBAHN AND ASSOCIATES INSURANCE AGENCY, INC.

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1876046**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 141 LONGWATER DRIVE

CITY/ST/ZIP: NORWELL, MA 02061

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:	JOHN THORBAHN	
TITLE:	PRES/SEC/TREAS	
ADDRESS:	141 LONGWATER DRIVE	
CITY/ST/ZIP/CO:	NORWELL, MA 02061	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LAUREN DELOUCHE	
TITLE:	ASSIST. SEC.	
ADDRESS:	1250 CAPITAL OF TEXAS HWY. S. BLDG. 2 SUITE 125	
CITY/ST/ZIP/CO:	AUSTIN, TX 78746	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MALIKA HINKSON	
TITLE:	DIRECTOR	
ADDRESS:	340 MADISON AVE 20TH FLOOR	
CITY/ST/ZIP/CO:	NEW YORK, NY 10173	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	EDWARD O'MALLEY	
TITLE:	DIRECTOR	
ADDRESS:	1250 CAPITAL OF TEXAS HWY. S. BLDG. 2 SUITE 125	
CITY/ST/ZIP/CO:	AUSTIN, TX 78746	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	BRETT SCHNEIDER	
TITLE:	DIRECTOR	
ADDRESS:	340 MADISON AVE. 20TH FLOOR	
CITY/ST/ZIP/CO:	NEW YORK, NY 10173	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LORI M. LIESER	
TITLE:	VICE PRESIDENT	
ADDRESS:	500 W. MADISON STREET SUITE 2400	
CITY/ST/ZIP/CO:	CHICAGO, IL 60661	

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/ LORI M.LIESER	LORI M.LIESER,	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.