

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212540085
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1.) CORPORATION NAME: Smoak Insurance Agency, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: INCORP SERVICES INC 7288 HANOVER GREEN DR MECHANICSVILLE, VA 23111 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: SC	DUE DATE: 10/31/2012 SCC ID NO: F1877564 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100,000
CLASS	AUTHORIZED				
COMMON	100,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1534 LEESBURG ROAD CITY/ST/ZIP: COLUMBIA, SC 29209

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.
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NAME: ROBIN S. NEWTON TITLE: PRES & TREAS ADDRESS: PO BOX 9125 CITY/ST/ZIP/CO: COLUMBIA, SC 29290	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: RICHARD E. SMOAK TITLE: VP & SECRETARY ADDRESS: PO BOX 9125 CITY/ST/ZIP/CO: COLUMBIA, SC 29290	<input checked="" 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/ ROBIN S. NEWTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROBIN S. NEWTON, PRES & TREAS PRINTED NAME AND CORPORATE TITLE	10/17/2012 DATE
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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.