

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213515457

1.) CORPORATION NAME:

PLATEAU CASUALTY INSURANCE COMPANY

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1895962**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2701 North Main Street

CITY/ST/ZIP: Crossville, TN 38555

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: WILLIAM D WILLIAMS OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: 2701 N MAIN STREET
CITY/ST/ZIP/CO: CROSSVILLE, TN 38557-7001

NAME: WILLIAM MICHAEL RAMSEY OFFICER DIRECTOR
TITLE: TREASURER
ADDRESS: 2701 N MAIN STREET
CITY/ST/ZIP/CO: CROSSVILLE, TN 38557-7001

NAME: EURETHA J ROBERTS OFFICER DIRECTOR
TITLE: SECRETARY
ADDRESS: 2701 N MAIN STREET
CITY/ST/ZIP/CO: CROSSVILLE, TN 38557-7001

NAME: DAVID MICHAEL GRAHAM OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 2701 N MAIN STREET
CITY/ST/ZIP/CO: CROSSVILLE, TN 38557-7001

NAME: THOMAS L WILLIAMS OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 2701 N MAIN STREET
CITY/ST/ZIP/CO: CROSSVILLE, TN 38557-7001

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/ WILLIAM MICHAEL RAMSEY
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

WILLIAM MICHAEL RAMSEY,
TREASURER
PRINTED NAME AND CORPORATE
TITLE

3/28/2013
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.