

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215513648				
1.) CORPORATION NAME: SOUTH ATLANTIC INSURANCE SERVICES, INC.		DUE DATE: 6/30/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: REGISTERED AGENTS INC 4445 CORPORATION LANE STE 264 VIRGINIA BEACH, VA		SCC ID NO: F1964693				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: VIRGINIA BEACH CITY		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</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED					
COMMON	100					
4.) STATE OR COUNTRY OF INCORPORATION: FL						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 7551 WILES RD STE 201 CITY/ST/ZIP: CORAL SPRINGS, FL 33067						
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: JOHN W EBERT TITLE: PRESIDENT ADDRESS: 7551 WILES RD STE 201 CITY/ST/ZIP/CO: CORAL SPRINGS, FL 33067		<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/ JOHN W EBERT	JOHN W EBERT, PRESIDENT	4/9/2015				
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.						