

SCC eFile

**2016 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

216509452

1.) CORPORATION NAME:

**First Casualty Insurance Agency, Inc.**

DUE DATE: **2/29/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOANNE L NOLTE  
THE NOLTE LAW FIRM PC  
1427 W MAIN ST**

SCC ID NO: **F1986985**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000
PREFER	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 190-A TURNER ST

CITY/ST/ZIP: SOUTHERN PINES, NC 28387

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 GILMORE  
 TITLE: PRESIDENT  
 ADDRESS: 190-A TURNER ST  
 CITY/ST/ZIP/CO: SOUTHERN PINES, NC 28387

OFFICER

DIRECTOR

NAME: ROBERT HECKER  
 TITLE: DIRECTOR  
 ADDRESS: 190-A TURNER ST  
 CITY/ST/ZIP/CO: SOUTHERN PINES, NC 28387

OFFICER

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/ WILLIAM GILMORE

WILLIAM GILMORE, PRESIDENT

3/15/2016

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.