

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000005022

FILED
Feb 10, 2012
Secretary of State

Entity Name: PEOPLES INSURANCE AGENCY, LLC

Current Principal Place of Business:

138 PUTNAM STREET
MARIETTA, OH 45750

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 738
MARIETTA, OH 45750

New Mailing Address:

FEI Number: 31-1398962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: COVAULT, LAURA V
Address: 416 HART ST.
City-St-Zip: MARIETTA, OH 45750

Title: MGR
Name: SULERZYSKI, CHUCK
Address: 138 PUTNAM STREET
City-St-Zip: MARIETTA, OH 45750

Title: MGR
Name: SCHNEEBERGER, CAROL A
Address: 138 PUTNAM STREET
City-St-Zip: MARIETTA, OH 45750

Title: MGR
Name: SLOANE, EDWARD G JR.
Address: 138 PUTNAM STREET
City-St-Zip: MARIETTA, OH 45750

Title: MGR
Name: CHAFFIN, THOMAS G
Address: 1557 WINCHESTER AVE.
City-St-Zip: ASHLAND, KY 41101

Title: MGR
Name: BARENGO, RANDALL T
Address: 416 HART STREET
City-St-Zip: MARIETTA, OH 45750

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAURA V. COVAULT

MGR

02/10/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date