

SECRETARY OF STATE'S ANNUAL VERIFICATION REPORT

Due June 30 (Corporations must file by this date to avoid bad standing status)

CAUTION READ CAREFULLY - Make check payable to Kentucky State Treasurer - Mail both annual report form and check to BOB BABBAGE, SECRETARY OF STATE, P. O. BOX 1150, FRANKFORD, KY 40602-1150 (502-561-2818)

RECORD # 113324

DUE : June 30, 1994

FILING FEE : 15.00

(1) EXACT CORPORATE NAME AND PRINCIPAL OFFICE ADDRESS :

SEAG INSURANCE AGENCY, INC
1722 GAGEL AVE.
P. O. BOX 16158
SHIVELY, KY. 40216

RECEIVED

JUN 16 1994

SECRETARY OF STATE

(3) STATE OF INCORPORATION :

KENTUCKY

(2) CORRECTED PRINCIPAL OFFICE ADDRESS :

(4) DATE OF INCORPORATION OR
CERTIFICATE OF AUTHORITY :

11-01-78

(5) REGISTERED AGENT AND REGISTERED ADDRESS :

RAYMOND H. SENG, II
1722 GAGEL AVE.
P. O. BOX 16158
SHIVELY, KY. 40216

A corporation may change its registered office or registered agent by filing a statement of change form per KRS 271B.5-020 (profit) and KRS 271.184 (non-profit). Forms are available by checking the request block below or writing to the Secretary of State's office.

YES, PLEASE SEND FORMS!

PLEASE TYPE OR PRINT (The annual report will not be accepted for filing if this section is not completed.)

List below names and business address of the corporation's directors and principal officers. If necessary attach a continuation sheet. (If you are the only officer, give your name and address and denote sole officer.)

PRESIDENT RAYMOND H. SENG, II
VICE PRESIDENT _____
SECRETARY _____
TREASURER _____
OTHER _____

I VERIFY THAT THE RECORDS OF THE SECRETARY OF STATE ARE TRUE AND CORRECT AND I AM AUTHORIZED TO SIGN THIS REPORT (ALL CORPORATIONS MUST SIGN OR AUTHORIZED SIGNATURE REQUIRED)

AUTHORIZED SIGNATURE Ray Seng TITLE President PHONE 502-419-2227

PROFESSIONAL SERVICE CORPORATIONS ONLY - KRS 274.105 Requires the names and addresses of all shareholders in addition to the directors and principal officers

Pursuant to KRS 274.105, I the undersigned, being President of the KRS Chapter 274 corporation, a professional service corporation, do hereby certify that all of the shareholders of the said corporation, not less than one half of the directors, and all officers other than secretary and treasurer, are duly qualified as provided in Chapter 274. (Please use the lines above or attach continuation sheet.)

PRESIDENT'S SIGNATURE _____