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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of Stat*
Corporations Divisio
148 W. River Stre
Providence, RI 02904-261
401.222.304

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: $50.00* **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK**

** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
24004	Markel Service, Inc.			
3. Street Address Principal Business Office		City	State	Zip
4521 Highwoods Parkway		Glen Allen	VA	23060
4. Business Phone No.	5. State of Incorporation			
804-527-7706	Virginia			

6. Brief Description of the Character of Business Conducted in Rhode Island
Insurance Services

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Anthony Foster Markel			Britton Lee Glisson		
Street Address			Street Address		
4521 Highwoods Parkway			4600 Cox Road		
City	State	Zip	City	State	Zip
Glen Allen	VA	23060	Glen Allen	VA	23060
Secretary Name			Treasurer Name		
Linda SickamRotz			Mary Allen Waller		
Street Address			Street Address		
4521 Highwoods Parkway			4600 Cox Road		
City	State	Zip	City	State	Zip
Glen Allen	VA	23060	Glen Allen	VA	23060

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Alan Irving Kirshner			Steven Andrew Markel		
Street Address			Street Address		
4521 Highwoods Parkway			4521 Highwoods Parkway		
City	State	Zip	City	State	Zip
Glen Allen	VA	23060	Glen Allen	VA	23060
Director Name			Director Name		
Richard Reeves Whitt III			Paul William Springman		
Street Address			Street Address		
4521 Highwoods Parkway			4521 Highwoods Parkway		
City	State	Zip	City	State	Zip
Glen Allen	VA	23060	Glen Allen	VA	23060

9. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐ **10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES			ISSUED SHARES -- THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
15,000		1.00	1,000	Common	1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this repor including any accompanying schedules and statements, and that all statemen contained herein are true and correct.

Mary Allen Waller 1/25/08
Signature *Date*

Mary Allen Waller
Print or Type Name

Treasurer
Title

[redacted]

File Date FILED
Check No. JAN 28 2008
By: By DS 10001043011
19223-35-222588
FOR SECRETARY OF STATE USE ONLY

Form 630 Rev. 12/06