

1.) CORPORATION NAME:

DUE DATE: **9/30/2013**

Colony National Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **05503024**

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000,000

GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8720 STONY POINT PARKWAY
ST 400

CITY/ST/ZIP: RICHMOND, VA 23235

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:	LOUIS DAVID LEVINSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	610 BROADWAY 4TH FLOOR		
CITY/ST/ZIP/CO:	NEW YORK CITY, NY 10012		

NAME:	SAMUEL C ANDERSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	8720 STONY POINT PKWY Ste 400		
CITY/ST/ZIP/CO:	RICHMOND, VA 23235		

NAME:	BARBARA LOU SUTHERLAND	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	175 E. HOUSTON ST STE 1300		
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78205		

NAME:	MELINDA JOY THOMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	8720 STONY POINT PARKWAY #400		
CITY/ST/ZIP/CO:	RICHMOND, VA 23235		

NAME:	CRAIG S COMEAUX	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	175 E. HOUSTON ST STE 1300		
CITY/ST/ZIP/CO:	SAN ANTONIO, TX 78205		

NAME:	MICHAEL E ARLEDGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	175 E. HOUSTON ST		
CITY/ST/ZIP/CO:	STE 1300 SAN ANTONIO, TX 78205		

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/ CRAIG S COMEAUX	CRAIG S COMEAUX, SECRETARY	8/5/2013
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.