

SCC eFile  
(6/10)

2011 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

211511855

1.) CORPORATION NAME:

**BALBOA INSURANCE COMPANY**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060**

DUE DATE: **4/30/2011**

SCC ID NO: **F0238164**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3349 MICHELSON DRIVE SUITE 200

CITY/ST/ZIP: IRVINE, CA 92612-8893

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: DONNA DESOUZA  
TITLE: VICE PRESIDENT  
ADDRESS: 401 N TRYON ST  
CITY/ST/ZIP/CO: NC1-021-02-20  
CHARLOTTE, NC 28255-

OFFICER

DIRECTOR

NAME: CHRISTINE M COSTAMAGNA  
TITLE: SECRETARY  
ADDRESS: 401 N TRYON ST  
CITY/ST/ZIP/CO: NC1-021-02-20  
CHARLOTTE, NC 28255-

OFFICER

DIRECTOR

NAME: THOMAS G MYRICK  
TITLE: DIRECTOR  
ADDRESS: 401 N TRYON ST  
CITY/ST/ZIP/CO: NC1-021-02-20  
CHARLOTTE, NC 28255-

OFFICER

DIRECTOR

NAME: KARI C DIXON  
TITLE: DIRECTOR  
ADDRESS: 401 N TRYON ST  
CITY/ST/ZIP/CO: NC1-021-02-20  
CHARLOTTE, NC 28255-

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/ DONNA DESOUZA  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

DONNA DESOUZA, VICE  
PRESIDENT  
PRINTED NAME AND CORPORATE  
TITLE

6/7/2011  
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.