

1.) CORPORATION NAME:

BALBOA INSURANCE COMPANY

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

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:	JANET A MACDONALD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	150 N COLLEGE ST		
CITY/ST/ZIP/CO:	NC1-028-17-06 CHARLOTTE, NC 28255		
NAME:	JASON PRITCHARD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	150 N COLLEGE ST		
CITY/ST/ZIP/CO:	NC1-028-17-06 CHARLOTTE, NC 28255		
NAME:	SCOTT M TAUCHER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	150 N COLLEGE ST		
CITY/ST/ZIP/CO:	NC1-028-17-06 CHARLOTTE, NC 28255		
NAME:	ERIC CHAMBERLAIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	150 N COLLEGE ST		
CITY/ST/ZIP/CO:	NC1-028-17-06 CHARLOTTE, NC 28255		

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.

<u>/s/ JASON PRITCHARD</u>	JASON PRITCHARD, VICE	<u>4/15/2014</u>
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.