

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211504941

1.) CORPORATION NAME:

OMNI INSURANCE COMPANY

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

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

DUE DATE: **3/31/2011**

SCC ID NO: **F0536377**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2018 POWERS FERRY ROAD

CITY/ST/ZIP: ATLANTA, GA 30339-

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: BRUCE SCHNITZER
TITLE: DIRECTOR
ADDRESS: 2018 PWOERS FERRY ROAD
CITY/ST/ZIP/CO: ATLANTA, GA 30339-

OFFICER DIRECTOR

NAME: BRUCE S ARNESON
TITLE: PRESIDENT
ADDRESS: 2018 POWERS FERRY ROAD
CITY/ST/ZIP/CO: ATLANTA, GA 30339-

OFFICER DIRECTOR

NAME: MARK J KEYSER
TITLE: TREASURER
ADDRESS: 2018 POWERS FERRY ROAD
CITY/ST/ZIP/CO: ATLANTA, GA 30339-

OFFICER DIRECTOR

NAME: WILLIAM B LOCKHORN
TITLE: CHAIRMAN/CEO
ADDRESS: SUITE 300 1000 RIVER ROAD
CITY/ST/ZIP/CO: CONSHOHOCKEN, PA 19428-

OFFICER DIRECTOR

NAME: JAMES C COMIS
TITLE: DIRECTOR
ADDRESS: SUITE 300 1000 RIVER ROAD
CITY/ST/ZIP/CO: CONSHOHOCKEN, PA 19428-

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.

<u>/s/ WILLIAM B LOCKHORN</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>WILLIAM B LOCKHORN, CHAIRMAN/CEO</u> PRINTED NAME AND CORPORATE TITLE	<u>3/2/2011</u> DATE
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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.