

1.) CORPORATION NAME:

**KAISER PERMANENTE INSURANCE COMPANY**

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

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor  
1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CA**

DUE DATE: **5/31/2011**

SCC ID NO: **F1252206**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	600
COMB	140
COMC	140

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 LAKESIDE DRIVE

CITY/ST/ZIP: OAKLAND, CA 94612-

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.

<p>NAME: MITCHELL J GOODSTEIN TITLE: P/D ADDRESS: 300 LAKESIDE DRIVE CITY/ST/ZIP/CO: OAKLAND, CA 94612-</p>	<p><input checked="" type="checkbox"/> OFFICER      <input checked="" type="checkbox"/> DIRECTOR</p>
<p>NAME: CHARLES BEVILACQUA TITLE: VP/COO ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-</p>	<p><input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR</p>
<p>NAME: DAN MCDERMOTT TITLE: CONTROLLER ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-</p>	<p><input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR</p>
<p>NAME: THOMAS R MEIER TITLE: TREASURER ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-</p>	<p><input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR</p>
<p>NAME: JANET LIANG TITLE: DIRECTOR ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-</p>	<p><input type="checkbox"/> OFFICER      <input checked="" type="checkbox"/> DIRECTOR</p>

NAME: GERARD C BAJADA TITLE: DIRECTOR ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: VICTORIA B ZATKIN TITLE: VP/S ADDRESS: ONE KAISER PLAZA CITY/ST/ZIP/CO: OAKLAND, CA 94612-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ VICTORIA B ZATKIN	VICTORIA B ZATKIN, VP/S	5/29/2011
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.