

1.) CORPORATION NAME:

BB&T Insurance Services of California, Inc.

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

DUE DATE: **8/31/2011**

SCC ID NO: **F1316803**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	90,000
COMBNV	10,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 19100 VON KARMAN STE 900

CITY/ST/ZIP: IRVINE, CA 92612-

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: MARTIN LOTH
TITLE: P/CEO
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

OFFICER

DIRECTOR

NAME: ANDREA LYNN HOLDER
TITLE: CFO
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

OFFICER

DIRECTOR

NAME: H WADE REECE
TITLE: CHAIRMAN
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

OFFICER

DIRECTOR

NAME: MARLYS RATLIFFE
TITLE: Sec / Treasurer
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

OFFICER

DIRECTOR

NAME: DAVID M PRUETT
TITLE: DIRECTOR
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

OFFICER

DIRECTOR

NAME: CAMILLE SMITH
TITLE: VICE PRESIDENT
ADDRESS: 19100 VON KARMAN STE 900
CITY/ST/ZIP/CO: IRVINE, CA 92612-

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/ ANDREA LYNN HOLDER ANDREA LYNN HOLDER, CFO 8/26/2011
SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE
LISTED IN THIS REPORT TITLE

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.