

1.) CORPORATION NAME:

Gencion Insurance Service, Inc.

DUE DATE: **1/31/2012**

SCC ID NO: **F1407693**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12501 OLD COLUMBIA PIKE

CITY/ST/ZIP: SILVER SPRING, MD 20904-6600

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: ROBERT EARL KYTE
TITLE: PRESIDENT
ADDRESS: 12501 OLD COLUMBIA PIKE
CITY/ST/ZIP/CO: SILVER SPRING, MD 20904-6600

OFFICER

DIRECTOR

NAME: ARTHUR F BLINCI
TITLE: VICE PRESIDENT
ADDRESS: 11291 PIERCE STREET
CITY/ST/ZIP/CO: RIVERSIDE, CA 92505-2705

OFFICER

DIRECTOR

NAME: SHARON M MABENA
TITLE: VP/SEC
ADDRESS: 12501 OLD COLUMBIA PIKE
CITY/ST/ZIP/CO: SILVER SPRING, MD 20904-

OFFICER

DIRECTOR

NAME: SHARON MABENA
TITLE: VP/T
ADDRESS: 12501 OLD COLUMBIA PIKE
CITY/ST/ZIP/CO: SILVER SPRING, MD 20904-6600

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/ SHARON M MABENA

SHARON M MABENA, VP/SEC

11/22/2011

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.