

1.) CORPORATION NAME:

EMMETT W. MacCORKLE, INC., INSURANCE SERVICES

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**

DUE DATE: **12/30/2010**

SCC ID NO: **F1451220**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 577 AIRPORT BLVD, STE 500

CITY/ST/ZIP: BURLINGAME, CA 94010-

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: KEITH FUJISHIGE
TITLE: SEC/DIR
ADDRESS: 577 AIRPORT BLVD
SUITE 500
CITY/ST/ZIP/CO: BURLINGAME, CA 94010-

OFFICER

DIRECTOR

NAME: ZACHARY GOLDENBERG
TITLE: TREASURER/DIR
ADDRESS: 577 AIRPORT BLVD
#500
CITY/ST/ZIP/CO: BURLINGAME, CA 94010-

OFFICER

DIRECTOR

NAME: BERNARD V LAUPER
TITLE: PRESIDENT
ADDRESS: 577 AIRPORT BLVD
#500
CITY/ST/ZIP/CO: BURLINGAME, CA 94010-

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/ BERNARD V LAUPER

BERNARD V LAUPER, PRESIDENT

10/27/2010

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.