

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212523652

1.) CORPORATION NAME:

Genworth North America Corporation

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

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

SCC ID NO: **F1514837**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	35,150

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

WA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6620 W BROAD ST

CITY/ST/ZIP: RICHMOND, VA 23230

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Patrick B. Kelleher		
TITLE:	P/CEO		
ADDRESS:	6620 W BROAD ST		
	BLDG 1		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	LEON E RODAY		
TITLE:	SR VP		
ADDRESS:	6620 W BROAD ST		
	BLDG 1		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WARD E BOBITZ		
TITLE:	SVP/GC/S		
ADDRESS:	6620 W BROAD ST		
	BLDG 1		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	VIDAL J TORRES, JR		
TITLE:	ASST SECRETARY		
ADDRESS:	6620 WEST BROAD STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	GARY T PRIZZIA		
TITLE:	TREASURER		
ADDRESS:	6620 W BROAD STREET		
	BLDG 1		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Martin P. Klein SVP and CFO 6620 W. Broad Street Richmond, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Scott J. McKay SVP 6620 W. Broad Stree Richmond, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> 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/ VIDAL J TORRES, JR <hr/> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VIDAL J TORRES, JR, ASST SECRETARY <hr/> PRINTED NAME AND CORPORATE TITLE	6/25/2012 <hr/> 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.			