

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214532553

1.) CORPORATION NAME:

Genworth North America Corporation

DUE DATE: **6/30/2014**

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**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	35,150

RICHMOND, VA

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.

NAME: LEON E. RODAY
 TITLE: P/CEO
 ADDRESS: 6620 W BROAD ST
 BLDG 1
 CITY/ST/ZIP/CO: RICHMOND, VA 23230

OFFICER

DIRECTOR

NAME: ELENA K. EDWARDS
 TITLE: VICE PRESIDENT
 ADDRESS: 700 MAIN STREET
 CITY/ST/ZIP/CO: LYNCHBURG, VA 24504

OFFICER

DIRECTOR

NAME: ERIC D. GEE
 TITLE: VICE PRESIDENT
 ADDRESS: 6620 WEST BROAD STREET
 CITY/ST/ZIP/CO: RICHMOND, VA 23230

OFFICER

DIRECTOR

NAME: LOUANNA G GOOLSBY
 TITLE: VICE PRESIDENT
 ADDRESS: 6620 WEST BROAD STREET
 CITY/ST/ZIP/CO: RICHMOND, VA 23230

OFFICER

DIRECTOR

NAME: KELLY L GROH
 TITLE: VP & CONTROLLER
 ADDRESS: 6620 WEST BROAD STREET
 CITY/ST/ZIP/CO: RICHMOND, VA 23230

OFFICER

DIRECTOR

NAME: GAIL F LASKOWITZ
 TITLE: VP & ASST TREAS
 ADDRESS: 6620 WEST BROAD STREET
 CITY/ST/ZIP/CO: RICHMOND, VA 23230

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL T MCGARRY ASST. VP 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA MERRILL VICE PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTHONY J PONSIGLIONE, II VICE PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL SHADLER ASST. VP 700 MAIN STREET LYNCHBURGH, VA 24504	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VIDAL J TORRES, JR VP & ASST. SEC. 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WARD E BOBITZ SVP/GC/S 6620 W BROAD ST BLDG 1 RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LANDIS W. ATKINSON, III ASST TREASURER 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH C EARLEY ASST TREASURER 6620 WEST BROAD STREET RICHMOND, VA 23030	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY S. WRIGHT TREASURER 6620 W BROAD STREET BLDG 1 RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD A. TEPPER ASST TREASURER 6620 WEST 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 STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAC J. AMERELL VP 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN P. KLEIN SVP 6620 W. BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL LAMING SVP 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THERESA A. MYERS ASST SECRETARY 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH J. PEHOTA SVP 3001 SUMMER STREET STAMFORD, CT 06905	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL J SHEEHAN, IV SVP & CIO 3001 SUMMER STREET STAMFORD, CT 06905	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOPE M VAUGHAN ASST SECRETARY 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT P. VROKYK SVP 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN L GREEN VICE PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRIS OLSON VICE PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUGLAS WEBB VICE PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	LISA J BALDYGA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	6620 WEST BROAD ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		

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/ HOPE M VAUGHAN	HOPE M VAUGHAN, ASST SECRETARY	6/24/2014
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.