

SCC eFile
(6/10)

2010 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

210503208

1.) CORPORATION NAME:

LIA Insurance Administrators, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
NATIONAL REGISTERED AGENTS INC
201 N. UNION ST. STE 140
ALEXANDRIA, VA 22314**

DUE DATE: **11/30/2010**

SCC ID NO: **F1568072**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

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

4.) STATE OR COUNTRY OF INCORPORATION:
PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1600 ANACAPA ST

CITY/ST/ZIP: SANTA BARBARA, CA 93101-

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 WILEY
TITLE: PRESIDENT
ADDRESS: 1600 ANACAPA ST
CITY/ST/ZIP/CO: SANTA BARBARA, CA 93101-

OFFICER

DIRECTOR

NAME: KARLENE GOFF
TITLE: VP/SEC
ADDRESS: 1600 ANACAPA ST
CITY/ST/ZIP/CO: SANTA BARBARA, CA 93101-

OFFICER

DIRECTOR

NAME: HELEN WILEY
TITLE: TREASURER
ADDRESS: 1600 ANACAPA ST
CITY/ST/ZIP/CO: SANTA BARBARA, CA 93101-

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/ KARLENE GOFF

KARLENE GOFF, VP/SEC

10/14/2010

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.