

1.) CORPORATION NAME:

Genworth Holdings, Inc.

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1655507**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	1,500,000,000
COMB	700,000,000
PREFER	100,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

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.

<p>NAME: THOMAS J MCINERNEY TITLE: PRES/CEO ADDRESS: 6620 W BROAD ST CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: WARD E BOBITZ TITLE: VP/ASST S ADDRESS: 6620 W BROAD ST CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: KELLY L GROH TITLE: VP/CONTROLLER ADDRESS: 6620 WEST BROAD STREET CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL J MCCULLOUGH TITLE: VP /AS ADDRESS: 6620 WEST BROAD STREET CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY S. WRIGHT TITLE: PRESIDENT ADDRESS: 6620 W BROAD ST CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
<p>NAME: LEON E RODAY TITLE: PRESIDENT ADDRESS: 6620 W BROAD ST CITY/ST/ZIP/CO: RICHMOND, VA 23230</p>	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN P KLEIN PRESIDENT 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINE A NESS ASST SECRETARY 6620 W BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL J SHEEHAN, IV VICE PRESIDENT 3001 SUMMER STREET STAMFORD, CT 06905	<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 ST 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:	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:	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:	LISA J BALDYGA TREASURER 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD A. BERTOLINI 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 23230	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD K. TANGARD 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:	EDWARD A. TEPPER ASST TREASURER 6620 WEST BROAD STREET RICHMOND, VA 23230	<input checked="" type="checkbox"/> OFFICER	<input 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/ HOPE M.VAUGHAN	HOPE M.VAUGHAN,	1/9/2014	
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.			