

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211519090

1.) CORPORATION NAME:

**SOUTHWEST MARINE AND GENERAL INSURANCE
COMPANY**

DUE DATE: **7/31/2011**

SCC ID NO: **F1761040**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

AZ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O S. DAVID CHILDERS, ESQ, LOW & CHILDERS PC
299 N. 44TH ST, STE 250

CITY/ST/ZIP: PHOENIX, AZ 85018-

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: JOSEPH BENEDEUCCI
TITLE: PRESIDENT/CEO
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER

DIRECTOR

NAME: THOMAS JOHN IACOPELLI
TITLE: TREASURER
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER

DIRECTOR

NAME: FRANK D. PAPALIA
TITLE: SECRETARY
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER

DIRECTOR

NAME: ANTHONY ARNOLD
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER

DIRECTOR

NAME: ROBERT BAILEY
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER

DIRECTOR

OFFICER DIRECTOR
NAME: STEVEN CARLSEN
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: HENRY CORNELL
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: CLEMENT DWYER
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: JONATHAN GARFINKEL
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: LAWRENCE HANNON
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: SUMIT RAJPAL
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: RICHARD SCHIFTER
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

OFFICER DIRECTOR
NAME: BRUCE SCHNITZER
TITLE: DIRECTOR
ADDRESS: 412 MT. KEMBLE AVE.
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07960-

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/ THOMAS JOHN IACOPELLI THOMAS JOHN IACOPELLI, 8/24/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT TREASURER DATE
PRINTED NAME AND CORPORATE TITLE

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.