

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213553524

1.) CORPORATION NAME:

**AIOI NISSAY DOWA INSURANCE COMPANY OF AMERICA**

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1873373**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 475 N. MARTINGALE RD  
SUITE 330

CITY/ST/ZIP: SCHAUMBURG, IL 60173-2275

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:	Hiroyuki Muto	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES & CEO		
ADDRESS:	475 N. MARTINGALE RD. SUITE 330 SCHAUMBURG, IL 60173-2275		
CITY/ST/ZIP/CO:			
NAME:	Hideyoshi Kamigata	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	475 N. MARTINGALE RD. SUITE 330 SCHAUMBURG, IL 60173-2275		
CITY/ST/ZIP/CO:			
NAME:	DAVID C ELSTROM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	475 N. MARTINGALE RD. SUITE 330 SCHAUMBURG, IL 60173-2275		
CITY/ST/ZIP/CO:			
NAME:	Joseph Farrell	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	15 Independence Blvd. Warren, NJ 07059		
CITY/ST/ZIP/CO:			
NAME:	Stephen P Tasy	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	15 Independence Blvd Warren, NJ 07059		
CITY/ST/ZIP/CO:			
NAME:	Pamela D. Black	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	15 Independence Blvd Warren, NJ 07059		
CITY/ST/ZIP/CO:			

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/ Pamela D.Black	Pamela D.Black,	11/5/2013
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.