

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000529

FILED
Jun 11, 2012
Secretary of State

Entity Name: BALBOA INSURANCE SERVICES, INC.

Current Principal Place of Business:

4500 PARK GRANADA
CALABASAS, CA 91302

New Principal Place of Business:

Current Mailing Address:

30930 RUSSELL RANCH RD
MAIL STOP: CA6-916-01-12
WESTLAKE VILLAGE, CA 91362

New Mailing Address:

150 N COLLEGE ST NC1-028-17-06
CHARLOTTE, NC 28255

FEI Number: 95-4662705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: BURDICK, TIMOTHY A
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

Title: SVP
Name: DESOUZA, DONNA
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

Title: SEC
Name: COSTAMAGNA, CHRISTINE
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

Title: TREA
Name: HORAK, MICHAEL R
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

Title: DIR
Name: BURDICK, TIMOTHY A
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

Title: DIR
Name: CLARK, MICHAEL
Address: 150 N COLLEGE ST NC1-028-17-06
City-St-Zip: CHARLOTTE, NC 28255

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONNA DESOUZA

SVP

06/11/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date