

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000529

Entity Name: BALBOA INSURANCE SERVICES, INC.

Current Principal Place of Business:

4500 PARK GRANADA
CALABASAS, CA 91302

Current Mailing Address:

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

FEI Number: 95-4662705

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title PRES
Name MACDONALD, JANET A
Address 150 N COLLEGE ST NC1-028-17-06
City-State-Zip: CHARLOTTE NC 28255

Title SVP
Name PRITCHARD, JASON
Address 150 N COLLEGE ST NC1-028-17-06
City-State-Zip: CHARLOTTE NC 28255

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

Title TREA
Name JOHNSON, MICHELLE M
Address 150 N COLLEGE ST NC1-028-17-06
City-State-Zip: CHARLOTTE NC 28255

Title DIR
Name CHRISTIAN, DE A L
Address 150 N COLLEGE ST NC1-028-17-06
City-State-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: JASON PRITCHARD

SVP

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date