

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002262

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** BALBOA LIFE & CASUALTY LLC

**Current Principal Place of Business:**

3349 MICHELSON DR., SUITE 200  
IRVINE, CA 92612

**New Principal Place of Business:**

**Current Mailing Address:**

3349 MICHELSON DR., SUITE 200  
IRVINE, CA 92612

**New Mailing Address:**

**FEI Number:** 33-0939798

**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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MCELROY, MARK  
Address: 3349 MICHELSON DRIVE, # 200  
City-St-Zip: IRVINE, CA 92612 US

Title: MEMB  
Name: BALBOA INSURANCE COMPANY  
Address: 3349 MICHELSON DR., SUITE 200  
City-St-Zip: IRVINE, CA 92612 US

Title: SVP  
Name: PELLERIN, KEITH  
Address: 201 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255 US

Title: DIR  
Name: MERTZEL, KEN  
Address: 3349 MICHELSON DRIVE, SUITE #200  
City-St-Zip: IRVINE, CA 92612 US

Title: SVP  
Name: KRAMER, ANDREW  
Address: 201 N TRYON ST  
City-St-Zip: CHARLOTTE, NC 28255 US

Title: SVP  
Name: KNOX, STEPHANIE  
Address: 3349 MICHELSON DRIVE, SUITE #200  
City-St-Zip: IRVINE, CA 92612 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BALBOA INSURANCE CO., BY MICHAEL TULLY, VP MEMB 04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date