

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844935

FILED  
Feb 22, 2011  
Secretary of State

**Entity Name:** CHARTIS AEROSPACE INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

1175 PEACHTREE STREET NE  
SUITE 1000  
ATLANTA, GA 30361

**New Principal Place of Business:**

1175 PEACHTREE STREET NE  
SUITE 1000  
ATLANTA, GA 30361 US

**Current Mailing Address:**

1175 PEACHTREE STREET NE  
SUITE 1000  
ATLANTA, GA 30361

**New Mailing Address:**

1175 PEACHTREE STREET NE  
SUITE 1000  
ATLANTA, GA 30361 US

**FEI Number:** 58-1354492

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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: MEYERHOFF, MARK A  
Address: 1175 PEACHTREE ST. NE, SUITE 1000  
City-St-Zip: ATLANTA, GA 30361 US

Title: VP  
Name: JARRETT, PETER S  
Address: 1175 PEACHTREE ST. NE, SUITE 1000  
City-St-Zip: ATLANTA, GA 30361 US

Title: VP  
Name: HUGHES, JAYNE K  
Address: 1175 PEACHTREE ST. NE, SUITE 1000  
City-St-Zip: ATLANTA, GA 30361 US

Title: VP  
Name: WILLIAMS, TYRA S  
Address: 1175 PEACHTREE ST. NE, SUITE 1000  
City-St-Zip: ATLANTA, GA 30361 US

Title: S  
Name: GEORGE, TANYA E  
Address: 175 WATER STREET  
City-St-Zip: NEW YORK, NY 10038

Title: VP  
Name: BAKER, DAVID W  
Address: 1175 PEACHTREE STREET NE, SUITE 1000  
City-St-Zip: ATLANTA, GA 30361

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: TYRA S. WILLIAMS

VP

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date