

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844935

Entity Name: AIG AEROSPACE INSURANCE SERVICES, INC.**Current Principal Place of Business:**1175 PEACHTREE STREET NE
SUITE 1000
ATLANTA, GA 30361**Current Mailing Address:**1175 PEACHTREE STREET NE
SUITE 1000
ATLANTA, GA 30361 US**FEI Number:** 58-1354492**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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 PRESIDENT / DIRECTOR
Name TROTTI, JOSEPH J
Address 1175 PEACHTREE STREET NE
 SUITE 1000
City-State-Zip: ATLANTA GA 30361

Title TREASURER
Name WALLS CAULFIELD, JUSTIN JEROME
Address 175 WATER STREET
 29TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name THOMAS, ROBERT JOHN
Address 175 WATER STREET
 24TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name ALEXANDRIS, STEPHEN E
Address 175 WATER STREET
City-State-Zip: NEW YORK NY 10038

Title SECRETARY
Name KENT, TANYA E
Address 175 WATER STREET
 15TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name MOITZO, JEFFREY D
Address 175 WATER STREET
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name DEKKER, GREGORY N
Address 175 WATER STREET
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name SCHIMEK, ROBERT SCOTT
Address 175 WATER STREET
 24TH FLOOR
City-State-Zip: NEW YORK NY 10038

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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: TANYA E KENT**SECRETARY****04/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BARRETT II, MICHAEL R
Address	175 WATER STREET
City-State-Zip:	NEW YORK NY 10038