

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002083

Entity Name: JPMORGAN DISTRIBUTION SERVICES, INC.**Current Principal Place of Business:**1111 POLARIS PARKWAY
COLUMBUS, OH 43240**Current Mailing Address:**1111 POLARIS PARKWAY
COLUMBUS, OH 43240 US**FEI Number: 74-2945358****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 DIRECTOR
Name GATCH, GEORGE C
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title ASSISTANT SECRETARY
Name DITULLIO, JESSICA K
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title DIRECTOR
Name MACHULSKI, MICHAEL R
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title TREASURER
Name ALTAHAWI, OMAR F
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title DIRECTOR
Name MONTGOMERY, SUSAN
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title PRESIDENT
Name MONTGOMERY, SUSAN
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title ASSISTANT SECRETARY
Name CASTRO, MARCELA
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

Title SECRETARY
Name DESOLA, AISLING VERONICA
Address 1111 POLARIS PARKWAY
City-State-Zip: COLUMBUS OH 43240

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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: MARCELA CASTRO**ASSISTANT SECRETARY 04/13/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BERGERE, BRIAN R
Address	1111 POLARIS PARKWAY
City-State-Zip:	COLUMBUS OH 43240