## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006663

Entity Name: RENTAL INSURANCE SERVICES, INC.

**Current Principal Place of Business:** 

600 CORPORATE PARK DRIVE ST LOUIS. MO 63105

**Current Mailing Address:** 

ATTN: LEGAL DEPT 600 CORPORATE PARK DRIVE ST LOUIS, MO 63105

FEI Number: 35-2257496 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

Officer/Director Detail:

Title Title **DIRECTOR** 

Name TAYLOR, ANDREW C Name NICHOLSON, PAMELA M

Address 600 CORPORATE PARK DRIVE Address 600 CORPORATE PARK DRIVE

City-State-Zip: ST LOUIS MO 63105 City-State-Zip: ST LOUIS MO 63105

DIRECTOR, TREASURER, PRESIDENT Title ASST. SECRETARY Title Name

THURMANN, ERICH SNYDER, WILLIAM W Name

Address 600 CORPORATE PARK DRIVE 600 CORPORATE PARK DRIVE Address

City-State-Zip: ST LOUIS MO 63105 ST LOUIS MO 63105 City-State-Zip:

Title **SECRETARY** 

Name BYSTROM, MICHAEL V

Address 600 CORPORATE PARK DRIVE

City-State-Zip: ST LOUIS MO 63105

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: WILLIAM W SNYDER

**TREASURER** 

04/12/2016

**FILED** Apr 12, 2016

**Secretary of State** 

CC1517247908

Date