

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000871

Entity Name: JH INSURANCE SERVICES, INC.**Current Principal Place of Business:**48 WALL STREET
17TH FLOOR
NEW YORK, NY 10005**Current Mailing Address:**48 WALL STREET
17TH FLOOR
NEW YORK, NY 10005 US**FEI Number:** 32-0171927**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	SECY
Name	COWARD, RUSSELL
Address	7 BISHOPSGATE
City-State-Zip:	LONDON EC2N 3AR

Title	D, COO
Name	SITTERLY, STEPHEN
Address	48 WALL STREET 17TH FLOOR
City-State-Zip:	NEW YORK NY 10005

Title	DIRECTOR, CEO
Name	HINMAN, EUGENE
Address	11800 AMBERPARK DRIVE SUITE 100
City-State-Zip:	ALPHARETTA GA 30009

Title	CHAIRMAN
Name	SPRINGMAN, PAUL
Address	48 WALL STREET 17TH FLOOR
City-State-Zip:	NEW YORK NY 10005

Title	D, CFO
Name	FOSTER, DAVID
Address	7 BISHOPSGATE
City-State-Zip:	LONDON EC2N 3AR

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: STEPHEN SITTERLY

COO

04/30/2018

Electronic Signature of Signing Officer/Director Detail_____
Date