

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002430

Entity Name: HOUSING INSURANCE SERVICES, INC.

Current Principal Place of Business:

189 COMMERCE COURT
CHESHIRE, CT 06410

Current Mailing Address:

189 COMMERCE COURT
CHESHIRE, CT 06410 US

FEI Number: 06-1314815

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 PRESIDENT, DIRECTOR
Name LABRIE, DAN
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title VP
Name MALASPINA, EDMUND
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title SECRETARY
Name GALVIN, AMY
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title TREASURER
Name WILSON, MARK
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

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: EDMUND MALASPINA

VP

04/05/2014

Electronic Signature of Signing Officer/Director Detail

Date