

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003937

Entity Name: SEGAL SELECT INSURANCE SERVICES, INC.**Current Principal Place of Business:**333 WEST 34TH STREET
NEW YORK, NY 10001**Current Mailing Address:**333 WEST 34TH STREET
NEW YORK, NY 10001**FEI Number:** 46-0619194**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 DIRECTOR, CHAIRMAN
Name LOCICERO, JOSEPH A.
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name GLEAVE, DIANE M.
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name DEMAIO, JOHN
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name CROTTY, SUSAN
Address 550 WASHINGTON BOULEVARD
SUITE 900
City-State-Zip: CHICAGO IL 60661

Title SENIOR VICE PRESIDENT, CHIEF
FINANCIAL OFFICER, TREASURER
Name DIBARTOLO, RICARDO M.
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title SENIOR VICE PRESIDENT,
SECRETARY
Name SINDER FRIEDMAN, MARGERY
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title CHIEF OPERATING OFFICER
Name MCNALLY, DIANE
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR, CHIEFEXECUTIVE
OFFICER, PRESIDENT
Name BLUMENSTEIN, DAVID
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

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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: MARGERY SINDER FRIEDMAN**SECRETARY****02/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHERMAN, ANDREW
Address 116 HUNTINGTON AVENUE
8TH FLOOR
City-State-Zip: BOSTON MA 02116

Title DIRECTOR
Name LERNER, STUART H.
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name KEILIN, EUGENE
Address 200 PARK AVENUE
City-State-Zip: NEW YORK NY 10016

Title DIRECTOR
Name GINGELL, JOHN
Address 101 NORTH WACKER DRIVE
SUITE 400
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name FLICK, EILEEN
Address 333 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name LYNCH, J. ROBINSON
Address 3333 QUALITY DRIVE
City-State-Zip: RANCHO CORDOVA CA 95670