

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002651

Entity Name: TOWERS WATSON INVESTMENT SERVICES, INC.**Current Principal Place of Business:**800 NORTH GLEBE ROAD
ARLINGTON, VA 22203**Current Mailing Address:**800 NORTH GLEBE ROAD
ARLINGTON, VA 22203 US**FEI Number:** 52-1868818**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, PRESIDENT
Name SRIVASTAVA, NIMISHA
Address 150 NORTH COLLEGE STREET
1 BANK OF AMERICA CENTER
City-State-Zip: CHARLOTE NC 28202

Title DIRECTOR
Name FORD, CHRIS
Address WATSON HOUSE
LONDON ROAD
City-State-Zip: REIGATE RH2 9PQ

Title DIRECTOR
Name MISRA, REKHA
Address 200 LIBERTY STREET
City-State-Zip: NEW YORK NY 10281

Title SECRETARY
Name DAVIS, ADINA
Address 800 NORTH GLEBE ROAD
City-State-Zip: ARLINGTON VA 22203

Title DIRECTOR, CHAIRMAN
Name BERRIMAN, PAUL CHRISTOPHER
Address 51 LIME STREET
City-State-Zip: LONDON EC3M7DQ

Title CHIEF COMPLIANCE OFFICER
Name GILBERT, MARK
Address 233 SOUTH WACKER DRIVE
City-State-Zip: CHICAGO IL 60606

Title TREASURER
Name MALKO, KLOI
Address 12 VICTORIAN HEIGHTS
THACKERAY ROAD
City-State-Zip: LONDON SW83TD

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: KLOI MALKO**TREASURER****04/24/2022**

Electronic Signature of Signing Officer/Director Detail

Date