## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002954

Entity Name: CHASE INSURANCE AGENCY SERVICES, INC.

FILED
Apr 16, 2016
Secretary of State
CC4353779472

## **Current Principal Place of Business:**

111 E. WISCONSIN ST.

STE. 1250

MILWAUKEE, WI 53202

## **Current Mailing Address:**

111 E. WISCONSIN ST.

STE. 1250

MILWAUKEE, WI 53202 US

FEI Number: 39-1610807 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 WARD, LINDA M

Address 277 PARK AVENUE

City-State-Zip: NEW YORK NY 101720003

Title DIRECTOR

Name ELBAZ, BENJAMIN

Address 383 MADISON AVENUE

City-State-Zip: NEW YORK NY 10179

Title DIRECTOR

Name WHITING, MICHAEL A

Address 1111 POLARIS PARKWAY

City-State-Zip: COLUMBUS OH 432402050

Title TREASURER

Name CECIL, JAMES D

Address 1111 POLARIS PARKWAY

FLOOR 2A

City-State-Zip: COLUMBUS OH 43240-2050

Title DIRECTOR

Name QUENTAL, GREGORY G.

Address 277 PARK AVENUE

City-State-Zip: NEW YORK NY 10172

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: LINDA M. WARD PRESIDENT 04/16/2016