

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002954

Entity Name: CHASE INSURANCE AGENCY SERVICES, INC.

Current Principal Place of Business:

111 EAST WISCONSIN ST.
MILWAUKEE, WI 53202

Current Mailing Address:

111 EAST WISCONSIN ST.
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 PANTALEO, LAURA A.
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

Title VP, DIRECTOR
Name SEGNINI, ROBERT A
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

Title SECRETARY
Name JORDAN, MARIE I.
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

Title TREASURER
Name LOVE, PETER
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

Title DIRECTOR
Name CORYDON, LESLIE R.
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

Title DIRECTOR
Name FINK, MARC J.
Address 111 EAST WISCONSIN ST.
City-State-Zip: MILWAUKEE WI 53202

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: MARIE I. JORDAN

SECRETARY

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date