

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006591

FILED  
May 25, 2010  
Secretary of State

Entity Name: SUNTRUST INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

303 PEACHTREE CENTER AVE  
STE 140  
ATLANTA, GA 30303

**New Principal Place of Business:**

**Current Mailing Address:**

303 PEACHTREE STREET NE - SUITE 3600  
C/O HASANA R KELLY  
ATLANTA, GA 30308

**New Mailing Address:**

FEI Number: 58-232680      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

PENNINGTON, LAURIE A  
200 SOUTH ORANGE AVE  
FL-ORL-2034 (SOAB)  
ORLANDO, FL 32801 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: LAURIE A PENNINGTON

05/25/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: TURTZ, STEVEN H  
Address: 303 PEACHTREE CENTER AVE - STE. 140  
City-St-Zip: ATLANTA, GA 30303

Title: SEC  
Name: VELLANI, MEHBOOB  
Address: 303 PEACHTREE STREET NE - 5TH FL  
City-St-Zip: ATLANTA, GA 30308

Title: TRES  
Name: BAKER, WALLACE LINK  
Address: 303 PEACHTREE CENTER AVE - ST 140  
City-St-Zip: ATLANTA, GA 30303

Title: VP  
Name: RICHARDSON, CHRISTINA A  
Address: 303 PEACHTREE CENTER AVE - STE 140  
City-St-Zip: ATLANTA, GA 30303

Title: VP  
Name: RUEVE, RONALD K  
Address: 303 PEACHTREE ST., NE - 7TH FL  
City-St-Zip: ATLANTA, GA 30308

Title: VP  
Name: WEAVER, GREG  
Address: 303 PEACHTREE ST. NE  
City-St-Zip: ATLANTA, GA 30308

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: HASANA R KELLY (STI/STB)

ACS

05/25/2010

Electronic Signature of Signing Officer or Director

Date