

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006591

FILED
May 01, 2012
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: 58-2326680 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

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

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

Title: CS
Name: JENKINS-HOLLEY, TIELESHA
Address: 303 PEACHTREE CENTER AVE - ST 140
City-St-Zip: ATLANTA, GA 30303

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

Title: VP
Name: SANGER, CATHLEEN L
Address: RIVERVIEW CENTER - 1001 SEMMES AVE
City-St-Zip: RICHMOND, VA 23224

Title: ACS
Name: KELLY, HASANA R
Address: 303 PEACHTREE ST NE - 36TH FL
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 KELLY

ACS

05/01/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date