2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001649

Entity Name: SOCIUS INSURANCE SERVICES, INC.

FILED Mar 29, 2011 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

120 HOWARD ST., STE. 220 301 HOWARD ST., STE. 1030 SAN FRANCISCO, CA 94105 SAN FRANCISCO, CA 94105

Current Mailing Address: New Mailing Address:

1350 CARLBACK AVENUE SUITE 200 WALNUT CREEK, CA 94596

FEI Number: 94-3399986 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: [

Name: HEFFERNAN, FRANCIS M III
Address: 1350 CARLBACK AVE., STE. 200
City-St-Zip: WALNUT CREEK, CA 94596

Title: F

Name: HANLEY, PATRICK

Address: 301 HOWARD ST., STE. 1030 City-St-Zip: SAN FRANCISCO, CA 94105

Title: SVP

 Name:
 LEFCOURT, PAUL J

 Address:
 301 HOWARD ST., STE. 1030

 City-St-Zip:
 SAN FRANCISCO, CA 94105

Title:

Name: RIZZO, CAROL

Address: 301 HOWARD ST., STE. 1030 City-St-Zip: SAN FRANCISCO, CA 94105

Title:

Name: SEBASTIANI, DANIELE
Address: 1350 CARLBACK AVE., STE 350
City-St-Zip: WALNUT CREEK, CA 94596

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: DANIELE SEBASTIANI T 03/29/2011