2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004934

Entity Name: E*TRADE INSURANCE SERVICES, INC.

FILED Jun 02, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
4500 BOHANNON DR. MENIO PARK, CA				4500 BOHANNON DR. MENLO PARK, CA			
Current Mailing Address:				New Mailing Address:			
4500 BOHANNON DR. MENIO PARK, CA			671 NORTH GLEBE ROAD 12TH FLOOR, ATTN. SELINA IBARRA ARLINGTON, VA 22203				
FEI Number: 94-3413228 FEI Number Applied For () FEI Num			nber 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	
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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:							
Title: Name: Address: City-St-Zip:	P () I ROBERTS, DAR 4005 WINDWAR ALPHARETTA, G	D PLAZA DRIVE		Title: Name: Address: City-St-Zip:	P (X) C RORER, LIAT 4005 WINDWAR ALPHARETTA, G		
Title: Name: Address: City-St-Zip:	CFO () I MULRON, SHAN 905 HIGHLAND F ROSEVILLE, CA	POINT DRIVE		Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	BELL, DENNIS	Delete NTRE DRIVE, SUITE 100 12121		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	S () I BUCHMAN, JOHI 671 NORTH GLE ARLINGTON, VA	N BE ROAD		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	AS () I BOCK, CYNTHIA 4500 BOHANNOI MENLO PARK, C	N DRIVE		Title: Name: Address: City-St-Zip:	D (X) C AGARWAL, NAVE 4500 BOHANNON MENLO PARK, C	N DR	
Title: Name: Address: City-St-Zip:	D () I CURCIO, MICHA 135 E. 57TH STF NEW YORK, NY	REET		Title: Name: Address: City-St-Zip:	()(Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN BUCHMAN S 06/02/2008