

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002275

FILED
Apr 06, 2010
Secretary of State

Entity Name: WELLS FARGO INSURANCE SERVICES OF NEW YORK, INC.

Current Principal Place of Business:

330 MADISON AVE., 7TH FLOOR
NEW YORK, NY 10017

New Principal Place of Business:

Current Mailing Address:

330 MADISON AVE., 7TH FLOOR
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 13-1806851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V
Name: MCGILL, KEVIN
Address: 330 MADISON AVE., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: VASD
Name: BRODERICK, DEBORAH M
Address: 330 MADISON AVE., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: DS
Name: GRECO, ROBERT M
Address: 330 MADISON AVE., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: T
Name: OSTERMEIER, CHRISTINE M
Address: 330 MADISON AVE., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: P
Name: KENNY, KEVIN
Address: 330 MADISON AVE., 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

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: ROBERT M. GRECO

S

04/06/2010

Electronic Signature of Signing Officer or Director

Date