

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004023

FILED
Jan 27, 2012
Secretary of State

Entity Name: JOHN HANCOCK INSURANCE AGENCY, INC.

Current Principal Place of Business:

197 CLARENDON STREET
BOSTON, MA 02116

New Principal Place of Business:

Current Mailing Address:

197 CLARENDON STREET
BOSTON, MA 02116

New Mailing Address:

FEI Number: 07-5325819

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

OFFICERS AND DIRECTORS:

Title: S
Name: EMANUEL, ALVES
Address: 601 CONGRESS ST.
City-St-Zip: BOSTON, MA 02210

Title: PD
Name: PATTERSON, LYNNE
Address: 601 CONGRESS STREET
City-St-Zip: BOSTON, MA 02210

Title: VD
Name: COLLINS, BRIAN
Address: 601 CONGRESS STREET
City-St-Zip: BOSTON, MA 02210

Title: VD
Name: WHITEHEAD, JEFFERY
Address: 601 CONGRESS STREET
City-St-Zip: BOSTON, MA 02210

Title: D
Name: THOMPSON, WALLACE
Address: 2 QUEEN STREET EAST
City-St-Zip: TORONTO, ON M5G 3C7 CA

Title: AS
Name: KWONG, YIU
Address: 200 BLOOR STREET EAST
City-St-Zip: TORONTO, ON M4W 1E5 CA

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: KWONG YIU

AS

01/27/2012

Electronic Signature of Signing Officer or Director

Date