2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2011
Secretary of State

DOCUMENT# P10000041123

Entity Name: JHS CAPITAL INSURANCE SERVICES, INC.

Current Principal Place of Business:

501 E. KENNEDY BLVD.
SUSITE 1400
TAMPA, FL 33602 US

New Principal Place of Business:

501 E. KENNEDY BLVD.
SUITE 1400
TAMPA, FL 33602 US

Current Mailing Address:

501 E. KENNEDY BLVD.
SUSITE 1400
TAMPA, FL 33602 US

New Mailing Address:

501 E. KENNEDY BLVD.
SUITE 1400
TAMPA, FL 33602 US

FEI Number: 27-2554841 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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: D,P
Name: ALVAREZ, ROBERT
Address: 501 E. KENNEDY BLVD. SUITE 1400
City-St-Zip: TAMPA, FL 33602 US

Title: D,S
Name: ALVAREZ, ROBERT
Address: 501 E. KENNEDY BLVD. STE 1400
City-St-Zip: TAMPA, FL 33602 US

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 G. ALVAREZ PRES 05/25/2011

Electronic Signature of Signing Officer or Director Date