

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000006591

**FILED**  
**Apr 30, 2016**  
**Secretary of State**  
**CC1736868687**

**Entity Name:** SUNTRUST INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

303 PEACHTREE CENTER AVE  
STE 140  
ATLANTA, GA 30303

**Current Mailing Address:**

303 PEACHTREE CENTER AVENUE  
SUITE 140  
ATLANTA, GA 30303 US

**FEI Number:** 58-2326680

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** MADONNA D. MALINOWSKI, ASSISTANT VP

04/30/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CS & DIRECTOR  
Name JENKINS-HOLLEY, TIELESHA  
Address 303 PEACHTREE CENTER AVE - ST  
140  
City-State-Zip: ATLANTA GA 30303

Title VP  
Name WEAVER, GREGORY C  
Address 303 PEACHTREE ST NE  
City-State-Zip: ATLANTA GA 30308

Title VP  
Name VACHERON, TERRY  
Address 303 PEACHTREE STREET NE  
City-State-Zip: ATLANTA GA 30308

Title ACS  
Name KELLY, HASANA R  
Address 303 PEACHTREE ST NE - 36TH FL  
City-State-Zip: ATLANTA GA 30308

Title PRESIDENT, DIRECTOR  
Name NULL, ROBERT ALEX  
Address 303 PEACHTREE CENTER AVENUE  
GA-ATLANTA-701  
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR  
Name SCHEID, LISA  
Address 303 PEACHTREE STREET NE  
GA-ATLANTA-0643  
City-State-Zip: ATLANTA GA 30308

*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:** HASANA KELLY

**ASST. CORP.**  
**SECRETARY (STI)**

04/30/2016

Electronic Signature of Signing Officer/Director Detail

Date