2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006591

Entity Name: SUNTRUST INSURANCE SERVICES, INC.

FILED
May 01, 2013
Secretary of State
CC4834777487

Current Principal Place of Business:

303 PEACHTREE CENTER AVE

STE 140

ATLANTA, GA 30303

Current Mailing Address:

303 PEACHTREE STREET NE - SUITE 3600 C/O HASANA R KELLY ATLANTA GA 30308

FEI Number: 58-2326680 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PENNINGTON, LAURIE A 200 SOUTH ORANGE AVE FL-ORL-2034 (SOAB) ORLANDO, FL 32801 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

Officer/Director Detail :

Title CEO & DIRECTOR Title TRES

Name BAKER, WALLACE LINK Name VELLANI, MEHBOOB

Address 303 PEACHTREE CENTER AVE - STE. Address 303 PEACHTREE STREET NE - 5TH FL

140

City-State-Zip: ATLANTA GA 30303 City-State-Zip: ATLANTA GA 30308

Title CS & DIRECTOR Title VF

NameJENKINS-HOLLEY, TIELESHANameWEAVER, GREGORY CAddress303 PEACHTREE CENTER AVE - STAddress303 PEACHTREE ST NE

City-State-Zip: ATLANTA GA 30308

Title VP

Name VACHERON, TERRY Name KELLY, HASANA R

Address 303 PEACHTREE STREET NE - 36TH FL

City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name SCHEID, LISA

Address 303 PEACHTREE ST NE 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. SECRETAR 05/01/2013

Date