

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000006289

**FILED  
Apr 20, 2016  
Secretary of State  
CC1311277788**

**Entity Name:** JPMORGAN CHASE & CO.

**Current Principal Place of Business:**

270 PARK AVENUE  
NEW YORK, NY 10017

**Current Mailing Address:**

270 PARK AVENUE  
NEW YORK, NY 10017 US

**FEI Number:** 13-2624428

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO, DIRECTOR  
Name DIMON, JAMES  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title ASSISTANT CORPORATE SECRETARY  
Name BANNERMAN, CHRISTINE N.  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title CFO  
Name LAKE, MARIANNE  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name BAMMANN, LINDA B  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name BELL, JAMES A  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name BOWLES, CRANDALL C  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name BURKE, STEPHEN B  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name CROWN, JAMES S  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

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*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:** CHRISTINE N. BANNERMAN

**ASSISTANT CORPORATE SECRETARY 04/20/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name FLYNN, TIMOTHY P  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name NEAL, MICHAEL A  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name WELDON, WILLIAM C  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name JACKSON, LABAN P JR.  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name RAYMOND, LEE R  
Address 270 PARK AVENUE  
City-State-Zip: NEW YORK NY 10017