

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003893

Entity Name: JARDINE LLOYD THOMPSON INSURANCE SERVICES, INC.**Current Principal Place of Business:**22 CENTURY HILL DRIVE, SUITE 102
LATHAM, NY 12110**Current Mailing Address:**22 CENTURY HILL DRIVE, SUITE 102
LATHAM, NY 12110 US**FEI Number: 37-1492329****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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SD
Name	SCARBOROUGH, JAY
Address	22 CENTURY HILL DRIVE, SUITE 102
City-State-Zip:	LATHAM NY 12110

Title	P
Name	AMANTEA, GUIDO
Address	1111 W. GEORGIA ST., 16TH FLOOR
City-State-Zip:	VANCOUVER, BC V6E 4-G2

Title	TD
Name	FRAZIER, LORI
Address	22 CENTURY HILL DRIVE, SUITE 102
City-State-Zip:	LATHAM NY 12110

Title	VP
Name	TOURT, LAURA A
Address	22 CENTURY HILL DRIVE, SUITE 102
City-State-Zip:	LATHAM NY 12110

Title	VP
Name	REISS, ROBYN E
Address	22 CENTURY HILL DRIVE SUITE 102
City-State-Zip:	LATHAM NY 12110

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: ROBYN REISS**VP****05/12/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date