

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003169

Entity Name: PRIMERICA CONVENTION SERVICES, INC.**Current Principal Place of Business:**1 PRIMERICA PARKWAY
DULUTH, GA 30099-0001**Current Mailing Address:**1 PRIMERICA PARKWAY
C/O JILLIAN TERRY
DULUTH, GA 30099-0001 US**FEI Number: 58-2244008****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 DIRECTOR, PRESIDENT
Name BRITT, CHESS E
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title SENIOR VICE PRESIDENT
Name HOWELL, NANCY A
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title SECRETARY
Name GEER, STACEY K
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title EXECUTIVE VICE PRESIDENT
Name RAND, ALISON S
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title TREASURER
Name WELLS, MICHAEL K
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title ASST. SECRETARY
Name PULLARD, GLORIA T
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001Title DIRECTOR
Name PITTS, GREGORY C
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099Title ASST. SECRETARY
Name COOPERIDER, TODD M
Address 1 PRIMERICA PARKWAY
City-State-Zip: DULUTH GA 30099-0001

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: GLORIA T PULLARD**ASST. SECRETARY****02/14/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date