

No. C 187876		Due no later than Jul 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. JHS CAPITAL INSURANCE SERVICES, INC. 501 E KENNEDY BLVD SUITE 1400 TAMPA FL 33602		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ROBERT G ALVAREZ	501 E KENNEDY BLVD SUITE 1400	TAMPA	FL	USA	33602	
DIRECTOR	ROBERT G ALVAREZ	501 E KENNEDY BLVD SUITE 1400	TAMPA	FL	USA	33602	
PRESIDENT	ROBERT G ALVAREZ	501 E KENNEDY BLVD SUITE 1400	TAMPA	FL	USA	33602	
5. Organized Under the Laws of: FL C 187876		6. Annual Report must be signed.* Signature: Melissa L Beaver Date: 09/13/2011 Name (type or print): Melissa L Beaver Title: Insurance Agency Admin					
Processed 09/13/2011		* Electronically provided signatures are accepted as original signatures.					