

SCC eFile

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212551915

1.) CORPORATION NAME:

**Morgan Stanley Insurance Services Inc.**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F0297574**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1300 THAMES STREET  
CORPORATE LICENSING; 6 FL

CITY/ST/ZIP: BALTIMORE, MD 21231

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEPHEN T. MARYNOWSKI	
TITLE:	DIRECTOR	
ADDRESS:	2000 WESTCHESTER AVENUE	
CITY/ST/ZIP/CO:	PURCHASE, NY 10577	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LOUIS A PALLADINO, JR.	
TITLE:	VICE PRESIDENT	
ADDRESS:	1633 BROADWAY	
CITY/ST/ZIP/CO:	NEW YORK, NY 10019	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN A. CASSIDY	
TITLE:	TREASURER	
ADDRESS:	750 SEVENTH AVENUE	
CITY/ST/ZIP/CO:	NEW YORK, NY 10019	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DANIEL FITZPATRICK	
TITLE:	DIRECTOR	
ADDRESS:	485 LEXINGTON AVENUE	
CITY/ST/ZIP/CO:	NEW YORK, NY 10017	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN W PICONE	
TITLE:	DIRECTOR	
ADDRESS:	2000 WESTCHESTER AVENUE	
CITY/ST/ZIP/CO:	PURCHASE, NY 10577	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARC GORDON	
TITLE:	PRESIDENT	
ADDRESS:	2000 WESTCHESTER AVENUE	
CITY/ST/ZIP/CO:	PURCHASE, NY 10577	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN W PICONE CHIEF EXEC OFCR 2000 WESTCHESTER AVENUE PURCHASE, NY 10577	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK RIECK VICE PRESIDENT 2000 WESTCHESTER AVENUE PURCHASE, NY 10577	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH TOLEDANO VICE PRESIDENT 2000 WESTCHESTER AVENUE PURCHASE, NY 10577	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELORA BASU VICE PRESIDENT 201 PLAZA TWO JERSEY CITY, NJ 07311	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD CASEY VICE PRESIDENT 201 PLAZA TWO JERSEY CITY, NJ 07311	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HANY YOUNIS VICE PRESIDENT 201 PLAZA TWO JERSEY CITY , VA 07311	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK ZAFRAN VICE PRESIDENT 522 FIFTH AVENUE NEW YORK, NY 10036	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEANNE O GREELEY ASST SECRETARY 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AARON GUTH ASST SECRETARY 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JACOB E TYLER, IV ASST SECRETARY 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN W ENOCH VICE PRESIDENT 1300 THAMES STREET 6TH FLOOR BALTIMORE, MD 21231	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: DANIEL FITZPATRICK TITLE: SECRETARY ADDRESS: 485 LEXINGTON AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEPHEN T MARYNOWSKI TITLE: PRESIDENT ADDRESS: 2000 WESTCHESTER AVENUE CITY/ST/ZIP/CO: PURCHASE, NY 10577	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: DMITRIY NAGOREV TITLE: VICE PRESIDENT ADDRESS: 1633 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ANITA RIOS TITLE: ASST TREASURER ADDRESS: 750 SEVENTH AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ETHAN J SCHIFFMAN TITLE: VICE PRESIDENT ADDRESS: 1633 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ STEPHEN T. MARYNOWSKI SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEPHEN T. MARYNOWSKI, DIRECTOR PRINTED NAME AND CORPORATE TITLE	7/16/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		