

1.) CORPORATION NAME:

SunTrust Insurance Services, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

GA

DUE DATE: **11/30/2011**

SCC ID NO: **F1449521**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 100,000 |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 303 PEACHTREE CENTER AVENUE
SUITE 140

CITY/ST/ZIP: ATLANTA, GA 30303-

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.

NAME: RON K RUEVE
TITLE: CORP EX VP
ADDRESS: 303 PEACHTREE ST NE (7TH FL.)
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

OFFICER DIRECTOR

NAME: GREGORY C WEAVER
TITLE: CORP EVP
ADDRESS: 303 PEACHTREE ST. NE
CITY/ST/ZIP/CO: ATLANTA, GA 30308-

OFFICER DIRECTOR

NAME: JENNER WOOD
TITLE: DIRECTOR
ADDRESS: 25 PARK PLACE
3RD FLOOR-MAIN OFFICE
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

OFFICER DIRECTOR

NAME: MEHBOOB VELLANI
TITLE: TREASURER
ADDRESS: 3030 PEACHTREE STREET NE
5TH FLOOR
CITY/ST/ZIP/CO: ATLANTA, GA 30308-

OFFICER DIRECTOR

| | | |
|--|--|--------------------|
| NAME: TIELESHA JENKINS-HOLLEY TITLE: SECRETARY ADDRESS: 303 PEACHTREE CENTER AVE SUITE 140 CITY/ST/ZIP/CO: ATLANTA, GA 30303- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: WALLACE LINK BAKER TITLE: PRESIDENT ADDRESS: 303 PEACHTREE CENTER AVE SUITE 140 CITY/ST/ZIP/CO: ATLANTA, GA 30303- | <input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: TINA M LEWIS TITLE: ASST SECRETARY ADDRESS: 303 PEACHTREE ST NE 36TH FLOOR CITY/ST/ZIP/CO: ATLANTA, GA 30308- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: HASANA R KELLY TITLE: ASST. SEC (STB) ADDRESS: 303 PEACHTREE STREET NE 36TH FLOOR CITY/ST/ZIP/CO: ATLANTA, GA 30308- | <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/ HASANA R KELLY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | HASANA R KELLY, ASST. SEC (STB) PRINTED NAME AND CORPORATE TITLE | 10/19/2011 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. | | |