

1.) CORPORATION NAME:

Towers Watson Investment Services, Inc.

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1632597**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 901 NORTH GLEBE RD

CITY/ST/ZIP: ARLINGTON, VA 22203

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: STEVEN CARLSON TITLE: PRESIDENT ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHRISTOPHER DEMEO TITLE: VICE PRESIDENT ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVEN CARLSON TITLE: TREASURER ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: REBECCA CARROLL TITLE: SECRETARY ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEVEN CARLSON TITLE: CFO ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: REBECCA CARROLL TITLE: CCO ADDRESS: 901 NORTH GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REBECCA CARROLL MLR OFFICER 901 NORTH GLEBE ROAD ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL HESS DIRECTOR 901 NORTH GLEBE ROAD ARLINGTON, VA 22203	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ STEVEN CARLSON	STEVEN CARLSON, PRESIDENT	6/24/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.