

1.) CORPORATION NAME:

Raymond James Insurance Services Group, Inc. (USEDIN

VA BY: Raymond James Insurance Group, Inc.)

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:
**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

DUE DATE: **4/30/2016**

SCC ID NO: **F1746272**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 880 CARILLON PARKWAY

CITY/ST/ZIP: ST PETERSBURG, FL 33716

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:	SCOTT L STOLZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	JAMES SWINK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	RICHARD B FRANZ, II	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	ANITA M KAILING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	ELIZABETH J MAZIAD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

NAME:	DENNIS W ZANK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	880 CARILLON PARKWAY		
CITY/ST/ZIP/CO:	ST PETERSBURG, FL 33716		

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.

<u>/s/ ELIZABETH J MAZIAD</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>ELIZABETH J MAZIAD, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>3/25/2016</u> 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.