

1.) CORPORATION NAME:

Hub International Northeast Limited

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1746462**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1065 AVENUE OF THE AMERICAS

CITY/ST/ZIP: NEW YORK, NY 10018

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: MARC I COHEN TITLE: CEO/PRESIDENT ADDRESS: 1065 AVE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10018	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: PHILIP ADLER TITLE: VICE PRESIDENT ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Joeph Hyde TITLE: TREASURER ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: IVY S FISCHER TITLE: VP/SEC ADDRESS: 1065 AVE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10018	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JASON ROMICK TITLE: VICE PRESIDENT ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MICHAEL P SABANOS TITLE: CEO/VP ADDRESS: 1065 AVE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10018	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: SCOTT GOODREAU TITLE: ASST SECRETARY ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MARTIN P HUGHES TITLE: DIRECTOR ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: W. KIRK JAMES TITLE: DIRECTOR ADDRESS: 300 N. LaSalle Street 17th Floor CITY/ST/ZIP/CO: CHICAGO, IL 60654	<input type="checkbox"/> OFFICER <input checked="" 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/ PHILIP ADLER	PHILIP ADLER, VICE PRESIDENT	3/20/2013
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.		