2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001649

Entity Name: SOCIUS INSURANCE SERVICES, INC.

Current Principal Place of Business:

99 OSGOOD PLACE SUITE 200 SAN FRANCISCO, CA 94133

Current Mailing Address:

99 OSGOOD PLACE SUITE 200 SAN FRANCISCO, CA 94133 US

FEI Number: 94-3399986

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

PRESIDENT, DIRECTOR	Title	TREASURER, SECRETARY, DIRECTOR
HANLEY, PATRICK	Name	SHAPIRO, ERIC
ress 99 OSGOOD PLACE SUITE 200 State-Zip: SAN FRANCISCO CA 94133	Address	99 OSGOOD PLACE SUITE 200
	City-State-Zip:	SAN FRANCISCO CA 94133
DIRECTOR	Title	
HEFFERNAN, F. MICHAEL III		DIRECTOR
Address99 OSGOOD PLACE SUITE 200City-State-Zip:SAN FRANCISCO CA 94133	Name	CONEWAY, DAVID
	Address	99 OSGOOD PLACE SUITE 200
	City-State-Zip:	SAN FRANCISCO CA 94133
DIRECTOR	Title	CEO, DIRECTOR
MILLER, GREGG A.		,
99 OSGOOD PLACE		OTT, NATHAN
SUITE 200 City-State-Zip: SAN FRANCISCO CA 94133	Address	99 OSGOOD PLACE SUITE 200
	City-State-Zip:	SAN FRANCISCO CA 94133
DIRECTOR		
HUNT, JOHN		
99 OSGOOD PLACE SUITE 200		
SAN FRANCISCO CA 94133		
	HANLEY, PATRICK 99 OSGOOD PLACE SUITE 200 SAN FRANCISCO CA 94133 DIRECTOR HEFFERNAN, F. MICHAEL III 99 OSGOOD PLACE SUITE 200 SAN FRANCISCO CA 94133 DIRECTOR MILLER, GREGG A. 99 OSGOOD PLACE SUITE 200 SAN FRANCISCO CA 94133 DIRECTOR HUNT, JOHN 99 OSGOOD PLACE SUITE 200	HANLEY, PATRICKName99 OSGOOD PLACE SUITE 200AddressSAN FRANCISCO CA 94133City-State-Zip:DIRECTORTitleHEFFERNAN, F. MICHAEL IIIName99 OSGOOD PLACE SUITE 200AddressSAN FRANCISCO CA 94133City-State-Zip:DIRECTORTitleMILLER, GREGG A.Title99 OSGOOD PLACE SUITE 200AddressSAN FRANCISCO CA 94133City-State-Zip:DIRECTORTitleMILLER, GREGG A.Address99 OSGOOD PLACE SUITE 200AddressSAN FRANCISCO CA 94133City-State-Zip:DIRECTORHUNT, JOHN99 OSGOOD PLACE SUITE 200SGOOD PLACE

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ERIC SHAPIRO

SECRETARY

04/24/2022

Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date