

2018 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F96000001154

Entity Name: TMS RE, INC.

Current Principal Place of Business:

200 BRICKSTONE SQUARE STE 103
ANDOVER, MA 01810

Current Mailing Address:

200 BRICKSTONE SQUARE STE 103
ANDOVER, MA 01810 US

FEI Number: 65-0644164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGSITERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR STE A
TALLAHASSEE, FL 32301 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

_____ Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR,
 TREASURER, COO
Name MICUCCI, TRAVIS
Address 200 BRICKSTONE SQUARE, SUITE
 103
City-State-Zip: ANDOVER MA 01810

Title VP
Name DIXEY, MARJORIE LYNN
Address 200 BRICKSTONE SQUARE STE 103
City-State-Zip: ANDOVER MA 01810

Title DIRECTOR, CHAIRMAN, CEO
Name SHEVLIN, MICHAEL E.
Address 200 BRICKSTONE SQUARE
 SUITE 103
City-State-Zip: ANDOVER MA 01810

Title SEC, DIRECTOR
Name CHENG, TERESA M.
Address 5200 BLUEE LAGOON DRIVE
 SUITE 600
City-State-Zip: MIAMI FL 33126

Title VP
Name HAYS, NATHAN L.
Address 5200 BLUE LAGOON DRIVE
 SUITE 600
City-State-Zip: MIAMI FL 33126

Title VP
Name BROPHY, PETER
Address 200 BRICKSTONE SQUARE
 SUITE 103
City-State-Zip: ANDOVER MA 01810

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: TRAVIS J. MICUCCI

PRESIDENT

08/17/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date