

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808158

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** TRANSPORTATION INSURANCE COMPANY

**Current Principal Place of Business:**

333 S. WABASH AVE.  
CHICAGO, IL 60604

**New Principal Place of Business:**

**Current Mailing Address:**

333 S. WABASH AVE. - 28TH FLOOR  
CHICAGO, IL 60604

**New Mailing Address:**

**FEI Number:** 36-1877247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CEOP  
Name: MOTAMED, THOMAS F  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

Title: EVPD  
Name: KANTOR, JONATHAN D  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

Title: SVPT  
Name: HEMME, DENNIS R  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

Title: EVPD  
Name: PONTARELLI, THOMAS  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

Title: CFOD  
Name: MENSE, D. CRAIG  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

Title: AVP  
Name: SMITH, AMY M  
Address: 333 S. WABASH AVE  
City-St-Zip: CHICAGO, IL 60604

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: AMY M. SMITH

AVP

04/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date