

2005 FOR PROFIT CORPORATION ANNUAL REPORT

04-26-2005 90179012 ***150.00
F99000004418

DOCUMENT # F99000004418 1. Entry Name GTC INSURANCE AGENCY, INC.	
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FILED

05 MAY 26 PM 3:41

SECRET
TALLAHASSEE, FLORIDA
20057103

Principal Place of Business 12 READ'S WAY NEW CASTLE, DE 19720	Mailing Address 2500 LAKE COOK ROAD RIVERWOODS, IL 60015
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04052005 Chg-P CR2E034 (10/03)

City & State	City & State
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4. FEI Number 22-3662754	Applied For Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	ROBERTS, KATHY	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 READ'S WAY		NAME			
STREET ADDRESS		NEW CASTLE, DE 19720		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	VP	RICKERT, MICHAEL	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 READ'S WAY		NAME			
STREET ADDRESS		NEW CASTLE, DE 19720		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	S	GREENE, D. CHRISTOPHER	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2500 LAKE COOK ROAD		NAME			
STREET ADDRESS		RIVERWOODS, IL 60015		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	D	STOLBOF, EDWARD	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2500 LAKE COOK ROAD		NAME			
STREET ADDRESS		RIVERWOODS, IL 60015		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	D	CORLEY, KELLY M	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2500 LAKE COOK ROAD		NAME			
STREET ADDRESS		RIVERWOODS, IL 60015		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	D	MARTIN, JANET L	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2500 LAKE COOK ROAD		NAME			
STREET ADDRESS		RIVERWOODS, IL 60015		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert M. Murphy Robert M. Murphy 4/14/05 224-405-1179
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

20047189

F99000004418

GTC INSURANCE AGENCY, INC.

LIST OF OFFICERS AND DIRECTORS

<u>NAME AND TITLE</u>	<u>BUSINESS ADDRESS</u>
KATHY M. ROBERTS PRESIDENT	12 READS WAY NEW CASTLE, DELAWARE 19720
MICHAEL F. RICKERT VICE PRESIDENT, TREASURER AND ASSISTANT SECRETARY	12 READS WAY NEW CASTLE, DELAWARE 19720
D. CHRISTOPHER GREENE SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015 .
GERALD M. EGNER ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
ROBERT M. MURPHY ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
LINDA CHIRON ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
KATHRYN MCNAMARA CORLEY DIRECTOR	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
EDWARD STOLBOF DIRECTOR	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
MARIETA K. BORZYM INSURANCE OFFICER	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
JANET L. MARTIN DIRECTOR/INSURANCE OFFICER	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
DOROTHY A. MURDOCK INSURANCE OFFICER/COMPLIANCE OFFICER	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
KELLY L. SANCHEZ INSURANCE OFFICER	12 READS WAY NEW CASTLE, DELAWARE 19720
JOHY BYUNG-KOOK YOO INSURANCE OFFICER	12 READS WAY NEW CASTLE, DELAWARE 19720