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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 822335

1. Corporation Name
CONTINENTAL LOSS ADJUSTING SERVICES, INC.

Principal Place of Business	Mailing Address
CNA PLAZA 21S 333 S. WABASH CHICAGO IL 60685 US	CNA PLAZA 21S 333 S. WABASH CHICAGO IL 60685 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 01/24/1969

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 36-1892350 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HENGESHAUGH, BERNARD L		1.2 NAME		
STREET ADDRESS	CNA PLAZA		1.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60685		1.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CUMMING, DAVID T		2.2 NAME		
STREET ADDRESS	CNA PLAZA		2.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60685		2.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ROWLEY, THOMAS H		3.2 NAME		
STREET ADDRESS	CNA PLAZA		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60685		3.4 CITY-ST-ZIP		
TITLE	VPTS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	DEMPSEY, PAMELA S		4.2 NAME		
STREET ADDRESS	CNA PLAZA		4.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60685		4.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ROHRER, JEFFERY T		5.2 NAME		
STREET ADDRESS	CNA PLAZA		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60685		5.4 CITY-ST-ZIP		
TITLE	ASVP	☒ DELETE	6.1 TITLE	S	☐ Change ☒ Addition
NAME	PIERCE, CATHY J		6.2 NAME	Mary A. Ribikawskis	
STREET ADDRESS	CNA PLAZA		6.3 STREET ADDRESS	CNA Plaza	
CITY-ST-ZIP	CHICAGO IL 60685		6.4 CITY-ST-ZIP	Chicago, IL 60685	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Steven Harms — 4/1/99 — 312-822-3905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)

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CONTINENTAL LOSS ADJUSTING SERVICES, INC.

OFFICERS

Chairman of the Board & President	Bernard L. Hengesbaugh
Senior Vice President	Robert Van Giesen
Group Vice President	David T. Cumming
Group Vice President	Thomas H. Rowley
Group Vice President	Rima Skorubskas
Vice President & Treasurer	Pamela S. Dempsey
Vice President	Lawrence J.Boysen
Vice President	Jeffrey T. Rohrer
Assistant Vice President	Steven Harms
Secretary	Mary A. Ribikawskis
Assistant Secretary	Robert Grob
Assistant Secretary	Robert D. Winkenbach

DIRECTORS

David T. Cumming
Bernard L. Hengesbaugh
James W. MacDonald
Rima Skorubskas

Business Address for all
Officers and Directors is:
CNA Plaza
Chicago, IL 60685

5/98