

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005507

Entity Name: BUSEY TRUST COMPANY**Current Principal Place of Business:**100 W. UNIVERSITY AVE.
CHAMPAIGN, IL 61820**Current Mailing Address:**100 W. UNIVERSITY AVE.
CHAMPAIGN, IL 61820**FEI Number:** 37-1205455**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANDERSON, CURT A
7980 SUMMERLIN LAKES DR
FORT MYERS, FL 33907-1816 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:** CURT A. ANDERSON

02/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO
Name ANDERSON, CURT A
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title CS
Name MARSH, TERESA M
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title EVP
Name BALLSRUD, ROBERT J
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title DIRECTOR
Name DAWSON, T.O.
Address 2110 NOEL
City-State-Zip: CHAMPAIGN IL 61821

Title DIRECTOR
Name FELDMAN, VICTOR F
Address 66 GREENCROFT DR
City-State-Zip: CHAMPAIGN IL 61821

Title DIRECTOR
Name INGRUM, JEFFREY C
Address 301 S. VINE ST.
City-State-Zip: URBANA IL 61801

Title DIRECTOR
Name SORKIN, HARLAN L JR.
Address 12920 TOPPINGS ESTATE SOUTH DR.
City-State-Zip: ST. LOUIS MO 63131-1322

Title DIRECTOR
Name STURTEVANT, WILLIAM T
Address 1305 CROSS CREEK ROAD
City-State-Zip: MAHOMET IL 61853

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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: ROBERT J. BALLSRUD

EVP

02/13/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name THIES, DAVID C
Address P.O. BOX 189
City-State-Zip: URBANA IL 61801

Title DIRECTOR
Name WEBB, MARY ANN
Address 3207 YORKSHIRE CT.
City-State-Zip: BLOOMINGTON IL 61704

Title DIRECTOR
Name DENNISON, BRIAN R
Address 34 NEWPORT COURT
City-State-Zip: MORTON IL 61550

Title DIRECTOR
Name TYROLT, DAVID W
Address 724 N. MERCER ST.
City-State-Zip: DECATUR IL 62522

Title CHAIRMAN
Name DUKEMAN, VAN A
Address S RIVER OAKS DR
City-State-Zip: MAHOMET IL 61853