

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004825

Entity Name: MESIROW INSURANCE SERVICES, INC.

Current Principal Place of Business:

353 N CLARK ST.
11TH FLOOR
CHICAGO, IL 60654

FILED
Jan 28, 2020
Secretary of State
2696179103CC

Current Mailing Address:

353 N CLARK ST.
11TH FLOOR
CHICAGO, IL 60654 US

FEI Number: 36-3429604

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: BARBARA J CHRISTMAN

01/28/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, EXECUTIVE VP
Name FILLEY, TED C.
Address 701 B STREET
 6TH FLOOR
City-State-Zip: SAN DIEGO CA 92101

Title PRESIDENT, DIRECTOR
Name ZIMMER, P. GREGORY JR.
Address 1301 DOVE STREET
 SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title DIRECTOR, CEO, CHAIRMAN
Name CORBETT, THOMAS W.
Address 1301 DOVE STREET
 SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title DIRECTOR, SENIOR EXECUTIVE VP
Name HURST, RALPH S.
Address 1301 DOVE STREET
 SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title SECRETARY
Name BAUMANN, JENNIFER
Address 701 B STREET
 6TH FLOOR
City-State-Zip: SAN DIEGO CA 92101

Title CFO, SENIOR EXECUTIVE VP
Name ANDERS, ILENE
Address 1301 DOVE STREET
 SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title EXECUTIVE VP
Name HARNEY, JOHN
Address 353 N CLARK ST.
 11TH FLOOR
City-State-Zip: CHICAGO IL 60654

Title COO, SENIOR EXECUTIVE VP
Name CARPENTER, PETER
Address 1301 DOVE STREET
 SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

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: JENNIFER BAUMANN

SECRETARY

01/28/2020

Electronic Signature of Signing Officer/Director Detail

Date