

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004825

FILED
Jan 24, 2018
Secretary of State
CC2566276159

Entity Name: MESIROW INSURANCE SERVICES, INC.

Current Principal Place of Business:

353 N CLARK STREET, 11TH FLOOR
CHICAGO, IL 60654

Current Mailing Address:

353 N CLARK STREET, 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

01/24/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, VP

Name FILLEY, TED C.

Address 701 B STREET
6TH FLOOR

City-State-Zip: SAN DIEGO CA 92101

Title DIRECTOR, PRESIDENT

Name ZIMMER, P. GREGORY JR.

Address 1301 DOVE STREET, SUITE 200

City-State-Zip: NEWPORT BEACH CA 92660

Title DIRECTOR, CHAIRMAN, GEO

Name CORBETT, THOMAS W.

Address 1301 DOVE STREET, SUITE 200

City-State-Zip: NEWPORT BEACH CA 92660

Title DIRECTOR, VP

Name HURST, RALPH S.

Address 1301 DOVE STREET, SUITE 200

City-State-Zip: NEWPORT BEACH CA 92660

Title SECRETARY

Name ZAK, KENNETH A.

Address 701 B STREET
6TH FLOOR

City-State-Zip: SAN DIEGO CA 92101

Title CFO, SENIOR EXECUTIVE VICE
PRESIDENT

Name ANDERS, ILENE

Address 1301 DOVE STREET
SUITE 200

City-State-Zip: NEWPORT BEACH CA 92660

Title EXECUTIVE VICE PRESIDENT

Name HARNEY, JOHN

Address 353 N CLARK ST,
11TH FLOOR

City-State-Zip: CHICAGO IL 60654

Title COO, 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: KENNETH A. ZAK

SECRETARY

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date