

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003976

**FILED**  
**Apr 25, 2016**  
**Secretary of State**  
**CC1301174568**

**Entity Name:** CHICAGO BOARD OPTIONS EXCHANGE, INCORPORATED

**Current Principal Place of Business:**

400 S. LASALLE ST  
CHICAGO, IL 60605

**Current Mailing Address:**

400 S. LASALLE ST  
CHICAGO, IL 60605

**FEI Number: 36-2730838**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO  
Name TILLY, EDWARD T  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title P  
Name PROVOST, EDWARD  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title TCFO  
Name DEAN, ALAN J  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title S  
Name MOFFIE-SILVER, JOANNE  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title CD  
Name BRODSKY, WILLIAM J  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title D  
Name BORIS, JAMES R  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name ENGLISH, FRANK E JR.  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name FITZPATRICK, EDWARD J  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

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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: ALAN DEAN**

**CHIEF FINANCIAL  
OFFICER**

**04/25/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name FROETSCHER, JANET P  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name MARTIN, R. EDEN  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name PHILLIPS, SUSAN M  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name STONE, CAROLE E  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name SUNSHINE, EUGENE S  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name GOODMAN, JILL  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name PALMORE, RODERICK  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name SKINNER, SAMUEL K  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605

Title DIRECTOR  
Name TILLY, EDWARD T  
Address 400 S. LASALLE ST  
City-State-Zip: CHICAGO IL 60605