DOCUMENT # 804972					May 13, 2002 8:00 an Secretary of State			
-	A SURETY COMPANY, INC.			/		002 90080 025 **		
	,		V		05 15 20	702 90000 023	150.00	
Principal Pia	ace of Business	Mailing Address						
123 NORTH	WACKER DRIVE	P.O. BOX 8264						
26TH FLOO		CHICAGO IL 60680						
CHICAGO IL 60606 US					4 T #B HP (B 10 003) (B 10 10 10		SI BIBII BIBIS BIBIS SAN	
	Place of Business	La Maille Add						
2. Principal Place of Business 200 E RANPO (ph DR)					1 196101 18111 96111 81611 61610 FB	yen fadir siði bibli bibli dibl	IS DIERI OCOLA DIERI (ESI	
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
City & State ChicAGO, IL			"		4. FEI Number 36-3186	541	Applied For	
Zip 6060 / CountrOSA Zip		Zip	Country		5. Certificate of Status Desire	ed	Not Applicable 5 Additional	
	6. Name and Address of Current R	legistered Agent	<u> </u>		7. Name and Address of Ne	Fee R	equired	
·				Name	7. Name and Address of No	w Registered Agent		
INSURANCE COMMISSIONER				Street Address (P.O. Box Number is Not Acceptable)				
THE CAPITOL							11-10-	
TALLAHASSEE FL 32304								
				City		FL Zip	Code	
8. The above	e named entity submits this statement for	the purpose of changing its re	egistered	office or registe	ered agent, or both, in the State of		-	
SIGNATURE 9. This corp	Signature, typed or printed name of registered agent an oration is eligible to satisfy its Intangible	d title if applicable. (NOTE:		gent signature require		DATE		
	requirement and elects to do so. ria on back)	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Stat			10. Election Campaigr Trust Fund Contrib	· -, •	\$5.00 May Be Added to Fees	
11.	OFFICERS AND D	RECTORS	12.		ADDITIONS/CHANGES TO (OFFICERS AND DIREC	CTORS IN 11	
TITLE NAME	PCD COLE, DAVID. L.	☐ Delete	TITLE	PCI	Pario I	Ĺ X chi	ange 🔲 Addition	
STREET ADDRESS	123 NORTH WACKER DRIVE		NAME STREET A	ADDRESS COL	E, DAVIO L.			
CITY-ST-ZIP	CHICAGO IL 60606		CITY-ST	I	200 E. Randelph Dr., C	hicago, IL 60601	,	
TITLE	V	☐ Delete	TITLE	V	A T-10 T	₩)Cha	ange 🔲 Addition	
name Street address	Baer, Jerome I 123 n. Wacker Drive		NAME STREET A		ER, JEROME I.	/	1	
CITY-ST-ZIP	CHICAGO IL 60606		CITY-ST-		200 E. Randolph Dr., C	hicago, IL 60601	,	
TITLE	Т	☐ Delete	TITLE	7-		Cha	inge 🗌 Addition	
NAME Street address	AIGOTTI, DIANE		NAME	Aig	otti, DIAAE M.			
CITY-ST-ZIP	123 NORTH WACKER DRIVE CHICAGO IL 60606	•	STREET A	DDRESS	200 E. Randolph Dr., Chie	cago, IL 60601		
TITLE	VD	☐ Delete	TITLE	- Z		Cha	nge 🗌 Addition	
NAME	BAKKA, DRIANA L		NAME	Ĵz5	Chke, ARIENE	Xona	inge LJ Addition	
STREET ADDRESS CITY-ST-ZIP	123 N WACKER DR CHICAGO IL 60606		STREET A	DURESS I	200 E. Randolph Dr., Chic	900 II 60601	-	
TTLE	DV		CITY-ST-		/			
IAME	BARRETT, CAROLYN	⊏1 Delete	TITLE NAME	DY	crett, Carolyn	Cha.	nge	
STREET ADDRESS	123 N. WACKER DRIVE		STREET AC	DURESS	200 E. Randolph Dr., Chi	cago, IL 60601	Į	
CITY-ST-ZIP	CHICAGO IL 60606		CITY-ST-	ZIP	avo L. Imilovipii Di., Cili			
itle Iame	VD DAVIS, GREGG J	☐ Delete	TITLE NAME	Vρ	115, GREGE J	Char	nge 🔲 Addition	
TREET ADDRESS	123 NORTH WACKER DRIVE		STREET AT	UDDECC DAN	11) Pres A		ĺ	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CHICAGO IL 60606

CITY-ST-ZIP

SURED

NING OFFICER OR DIRECTOR

200 E. Randolph Dr., Chicago, IL 60601