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FILED

Feb 11 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 828862 (3)

1. Corporation Name  
INTERNATIONAL INSURANCE COMPANY

Principal Place of Business

181 WEST MADISON ST  
STE 2300  
CHICAGO IL 60602  
US

Mailing Address

181 WEST MADISON ST  
STE 2300  
CHICAGO IL 60602-4513  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

10/17/1972

3a. Date of Last Report

06/27/1996

4. FEI Number

22-1964136

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
THE CAPITOL BLDG.  
TALLAHASSEE FL 32399

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PC ☐ DELETE

NAME COUTU, MICHAEL A.  
STREET ADDRESS 1570 LITTLEFIELD COURT  
CITY-ST-ZIP LAKE FOREST IL

TITLE DSVP ☐ DELETE

NAME GIBBS, DENNIS C  
STREET ADDRESS 100 E HURON, #3501  
CITY-ST-ZIP CHICAGO IL 60611

TITLE DSVP ☐ DELETE

NAME HOLLOWAY, ANNE C.  
STREET ADDRESS 7 OAK HILL DR,  
CITY-ST-ZIP WOODSIDE CA

TITLE DSVP ☒ DELETE

NAME SHULAN, BRUCE C  
STREET ADDRESS 17 THISTLE LN  
CITY-ST-ZIP WARREN NJ

TITLE TCFO ☐ DELETE

NAME NORSWORTHY, THOMAS  
STREET ADDRESS 474 N. LAKE SHORE DRIVE  
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE D/V ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE D/V ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE D/V ☒ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE D/V/S ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1715 N. NORTH PARK AVE.  
CHICAGO, IL 60614

Charles G. Ehrlich  
819 Chestnut Ave.  
Wilmette, IL 60091

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Tom S. Posawitz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0-5-97

312-516-0200

Date Daytime Phone #

CR2E034 (9/96)

**ATTACHMENT TO**  
**1996 FLORIDA PROFIT CORPORATION ANNUAL REPORT**  
**INTERNATIONAL INSURANCE COMPANY**

**ITEM NO. 13 - ADDITIONAL OFFICERS AND DIRECTORS**

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Roger L. Prickett		
Street Address	One Twin Oaks Lane		
City, State, Zip	Annandale NJ 08801-3412		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Colin L. Gray		
Street Address	4140 N. Kostner Ave.		
City, State, Zip	Chicago, IL 60641		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Peter J. Siczewicz		
Street Address	615 Windham Ln		
City, State, Zip	Naperville IL 60540		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Dale P. Downing, Jr.		
Street Address	605 N. Point Dr.		
City, State, Zip	Schaumburg, IL 60193		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	John J. Bator		
Street Address	712 Gateshead Dr.		
City, State, Zip	Naperville, IL 60565		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Colleen Reilly		
Street Address	3438 N. Marshfield		
City, State, Zip	Chicago, IL 60657		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Robert D. Warren		
Street Address	930A N. Clark St.		
City, State, Zip	Chicago, IL 60610		

**ATTACHMENT TO**  
**1997 FLORIDA PROFIT CORPORATION ANNUAL REPORT**  
**INTERNATIONAL INSURANCE COMPANY**

**ITEM NO. 13 - ADDITIONAL OFFICERS AND DIRECTORS**

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Anthony I. Pye		
Street Address	295 Tillou Road		
City, State, Zip	South Orange, NJ 07079		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Jon I. Fieldman		
Street Address	1143 West Wrightwood		
City, State, Zip	Chicago, IL 60614		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	John M. Parker		
Street Address	543 Forest		
City, State, Zip	River Forest, IL 60305		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	David J. Nars		
Street Address	4800 E. Shady Lane		
City, State, Zip	Morris, IL 60450		

Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	John P. Biddar, Jr.		
Street Address	230 Weatherwood Cir.		
City, State, Zip	Alpharetta, GA 30201		