

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 11, 1999 8:00 am**  
**Secretary of State**

05-11-1999 90044 023 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 852306**

1. Corporation Name

**ARTHUR J. GALLAGHER & CO. (ILLINOIS)**

Principal Place of Business

**TWO PIERCE PLACE  
ITASCA IL 60143-3141  
US**

Mailing Address

**2 PIERCE PLACE  
ITASCA IL 60143  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/22/1982**

4. FEI Number

**36-2481781**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

2a. Mailing Address

**26** Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE FL 32301**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **VP**  
STREET ADDRESS **CAMPBELL, JOHN G.**  
CITY-ST-ZIP **TWO PIERCE PL.  
ITASCA IL**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **STRAUCH, MARK P.**  
CITY-ST-ZIP **TWO PIERCE PL.  
ITASCA IL**

TITLE ☐ DELETE  
NAME **VPD**  
STREET ADDRESS **CLOHERTY, MICHAEL J**  
CITY-ST-ZIP **TWO PIERCE PLACE  
ITASCA IL**

TITLE ☐ DELETE  
NAME **CEO**  
STREET ADDRESS **GALLAGHER, ROBERT E**  
CITY-ST-ZIP **TWO PIERCE PLACE  
ITASCA IL**

TITLE ☐ DELETE  
NAME **PD**  
STREET ADDRESS **LUEDERS, CHRISTINE**  
CITY-ST-ZIP **TWO PIERCE PLACE  
ITASCA IL**

TITLE ☐ DELETE  
NAME **S**  
STREET ADDRESS **FABIO, C**  
CITY-ST-ZIP **TWO PIERCE PL  
ITASCA IL 60143**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME **DAVID R. LONG**  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE **VPDS** ☒ 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 **C** ☒ Change ☐ Addition  
5.2 NAME **JACK H. LAZZARO**  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE **ASRC** ☒ Change ☐ Addition  
6.2 NAME **CHRISTINE D. GARDNER**  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: **X [Signature]**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-99  
Date

636/773-3800  
Daytime Phone #

CR2E034 (11/98)

545500-76044-20  
Doc# 852306

**ARTHUR J. GALLAGHER & CO. (ILLINOIS)**

**Incorporated :** Illinois  
**Date :** 08/04/60  
**% Ownership :** 100% Arthur J. Gallagher & Co.  
**Federal ID # :** 36-2481781

**CAPITAL STOCK:**

**Common**

Price/Par Value: None

Authorized: 1,000

Outstanding: 900

**DIRECTORS:**

Michael J. Cloherty	Director
J. Patrick Gallagher, Jr.	Director
Walter F. McClure	Director

**OFFICERS:**

Robert E. Gallagher	Chief Executive Officer
J. Patrick Gallagher, Jr.	President
Glenn D. Morrison	Area President
Angelo M. Nardi	Area President
Peter V. Wright	Area President
Michael J. Cloherty	Executive Vice President and CFO
Walter F. McClure	Senior Vice President
Jack H. Lazzaro	Vice President - Finance
Bette J. Brinkerhoff	Vice President - Human Resources
David R. Long	Vice President-Chief Investment Officer
David E. McGurn, Jr.	Vice President - Specialty Marketing & International
John C. Rosengren	Vice President and General Counsel
James W. Durkin, Jr.	Vice President
Nicholas M. Elsberg	Vice President
Joel C. Kornreich	Vice President
Gary M. Van der Voort	Vice President
Warren G. Van der Voort, Jr.	Vice President
John J. Caraher	Area Vice President-Finance
Dennis M. DeJesu	Area Vice President
John K. King	Area Vice President
James J. Murray, Jr.	Area Vice President
James E. Relyea	Area Vice President
Jerome P. Zacny	Area Vice President
David W. Carrell	Area Asst. Vice President

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Doc# 852306

**ARTHUR J. GALLAGHER & CO. (ILLINOIS)**

Douglas R. Mize  
Mark P. Strauch  
Sally Wasikowski  
Richard C. Cary  
Michael J. Cloherty  
Christine D. Greb

Area Asst. Vice President  
Treasurer  
Assistant Treasurer  
Controller  
Secretary  
Assistant Secretary

**Purpose of Business:**

Insurance Agency and Brokerage

**Primary Address:**

Two Pierce Place  
Itasca, IL 60143-3141