

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90153 036 ***158.75

DOCUMENT # F00000006613

1. Entity Name
SYNERGENCE GROUP, INC.



Principal Place of Business
**200 N. LASALLE STREET, SUITE 400
CHICAGO IL 60601**

Mailing Address
**200 N. LASALLE STREET, SUITE 400
CHICAGO IL 60601**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-4399129**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201-HAYS STREET
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV BALLARD, DANIEL J 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV COHEN, JUDITH 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DESMOND COUSINO, DARRAH 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FRIDAY, DENISE S 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEADLEY, PETER F 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV HUDSON, BEVERLY G 200 N. LASALLE STREET, SUITE 400 CHICAGO IL 60601	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHED LIST	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter F Headley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER F HEADLEY, President 1/13/03

312-419-4952

Date

Daytime Phone #

CR2E034 (10/02)

2003 Florida Uniform Business Report

Question #12 Attachment

Additions/Changes to Officers and Directors in Question #11

Attachment
FOOOOOOOO6613
30017815

Synergence Group, Inc.

200 N. LaSalle Street, Suite 400

Chicago, Illinois 60601

Title

*Name

Street Address

City, State, Zip

D

Jon N. Ekdahl

515 N. State Street

Chicago, Illinois 60610

☐ Change ☒ Addition

Title

*Name

Street Address

City, State, Zip

V

Denise S. Friday

200 N. LaSalle Street, Ste. 400

Chicago, Illinois 60601

☒ Change ☐ Addition

Title

*Name

Street Address

City, State, Zip

D

Denise M. Hagerty

515 N. State Street

Chicago, Illinois 60610

☐ Change ☒ Addition

Title

*Name

Street Address

City, State, Zip

PD Vice Chairman of the Board

Peter F. Headley

200 N. LaSalle Street, Ste. 400

Chicago, Illinois 60601

☒ Change ☐ Addition

Title

*Name

Street Address

City, State, Zip

TVD

Mary A. McHugh

200 N. LaSalle Street, Ste. 400

Chicago, Illinois 60601

☐ Change ☒ Addition

Title

*Name

Street Address

City, State, Zip

DC

Robert A. Musacchio, PhD

515 N. State Street

Chicago, Illinois 60610

☐ Change ☒ Addition

Title

*Name

Street Address

City, State, Zip

AV

Mary T. Schnur

200 N. LaSalle Street, Ste. 400

Chicago, Illinois 60601

☐ Change ☒ Addition

Title

*Name

Street Address

City, State, Zip

VS

Susan J. Schuman

200 N. LaSalle Street, Ste. 400

Chicago, Illinois 60601

☐ Change ☒ Addition

Attachment

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30017815

2003 Florida Uniform Business Report
Question #12 Attachment
Additions/Changes to Officers and Directors in Question #11

Synergence Group, Inc.
200 N. LaSalle Street, Suite 400
Chicago, Illinois 60601

Title
***Name**
Street Address
City, State, Zip

D
J. Todd Vande Hey
515 N. State Street
Chicago, Illinois 60610

☐ Change ☒ Addition

Title
***Name**
Street Address
City, State, Zip

AV
Cynthia K. Warden
200 N. LaSalle Street, Ste. 400
Chicago, Illinois 60601

☐ Change ☒ Addition

*Previously reported.