

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002643

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: AMERICAN BAR ENDOWMENT, INC.

**Current Principal Place of Business:**

321 N. CLARK ST. 14TH ST.  
CHICAGO, IL 60610

**New Principal Place of Business:**

**Current Mailing Address:**

321 N. CLARK ST. 14TH ST.  
CHICAGO, IL 60610

**New Mailing Address:**

FEI Number: 36-2384321      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BASS, HILARIE  
C/O GREENBERG TRAURIG PA  
1221 BRICKEL AVE., FLOOR 21  
MIAMI, FL 331313224 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HUBBARD, WILLIAM C  
Address: 1320 MAIN STREET  
City-St-Zip: COLUMBIA, SC 29201

Title: P ( ) Delete  
Name: JOHNSON, I.S. LEEVY  
Address: 1615 BARNWLL STREET  
City-St-Zip: COLUMBIA, SC 29201

Title: T ( ) Delete  
Name: MATHEWS, RODERICK B  
Address: 1111 E. MAIN STREET  
City-St-Zip: RICHMOND, VA 23218

Title: VP ( ) Delete  
Name: EDMON, LEE  
Address: 111 N. HILL STREET, DEPT. 68  
City-St-Zip: LOS ANGELES, CA 90012

Title: D ( ) Delete  
Name: THOMPSON, CHARLES M  
Address: BOX 160  
City-St-Zip: PIERRE, SD 57501

Title: D ( ) Delete  
Name: BARRETT, JANE H  
Address: 1999 AVENUE OF THE STARS  
City-St-Zip: LOS ANGELES, CA 90067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: JOHNSON, I.S. LEEVY  
Address: 1615 BARNWELL STREET  
City-St-Zip: COLUMBIA, SC 29201

Title: T (X) Change ( ) Addition  
Name: MATHEWS, RODERICK B  
Address: 1001 HAXALL POINT  
City-St-Zip: RICHMOND, VA 23219

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: THOMPSON, CHARLES M  
Address: P.O. BOX 160  
City-St-Zip: PIERRE, SD 57501

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: I.S. LEEVY JOHNSON

P

01/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date