

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 BARNWELL 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