

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006091

FILED
Apr 23, 2007
Secretary of State

Entity Name: IVANTAGE SELECT AGENCY, INC.

Current Principal Place of Business:

51 W HIGGINS RD SUITE S2A
SOUTH BARRINGTON, IL 60010 US

New Principal Place of Business:

Current Mailing Address:

51 W HIGGINS RD SUITE S2A
SOUTH BARRINGTON, IL 60010 US

New Mailing Address:

FEI Number: 36-4480339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: RIEDER, ANDREW T
Address: 2775 SANDERS RD
City-St-Zip: NORTHBROOK, IL 60062

Title: VP () Delete
Name: PILCH, SAMUEL H
Address: 3075 SANDERS RD
City-St-Zip: NORTHBROOK, IL 60062

Title: V () Delete
Name: LAUSER, STEVEN R
Address: 51 WEST HIGGINS ROAD S2A
City-St-Zip: SOUTH BARRINGTON, IL 60010

Title: S () Delete
Name: MCGINN, MARY J
Address: 3075 SANDERS ROAD G5A
City-St-Zip: NORTHBROOK, IL 60062

Title: T () Delete
Name: VERNEY, STEVEN C
Address: 3075 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

Title: P () Delete
Name: BOLLINGER, CHARLES
Address: 2775 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL PILCH

Electronic Signature of Signing Officer or Director

OFCR

04/23/2007

_____ Date