

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000295

FILED
Jan 26, 2011
Secretary of State

Entity Name: HARRIS BANCORP INSURANCE SERVICES, INC.

Current Principal Place of Business:

111 W. MONROE ST. 3C
CHICAGO, IL 60603

New Principal Place of Business:

111 W. MONROE ST.
19 EAST LEGAL
CHICAGO, IL 60603

Current Mailing Address:

111 W. MONROE ST. 3C
CHICAGO, IL 60603

New Mailing Address:

111 W. MONROE ST.
19 EAST LEGAL
CHICAGO, IL 60603

FEI Number: 36-4486271

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

OFFICERS AND DIRECTORS:

Title: D
Name: JENKINS, TERRY
Address: 111 WEST MONROE STREET
City-St-Zip: CHICAGO, IL 60603

Title: OD
Name: MISTARZ, CECILY
Address: 111 WEST MONROE STREET
City-St-Zip: CHICAGO, IL 60603

Title: O
Name: FLICK, CAROL
Address: 111 WEST MONROE STREET
City-St-Zip: CHICAGO, IL 60603

Title: VP
Name: ROBERTS, ALBERTA S
Address: 111 WEST MONROE STREET
City-St-Zip: CHICAGO, IL 60603

Title: VP
Name: GERDING, DANIEL
Address: 111 W MONROE ST
City-St-Zip: CHICAGO, IL 60603

Title: OD
Name: MIROBALLI, MICHAEL
Address: 111 WEST MONROE STREET
City-St-Zip: CHICAGO, IL 60603

I hereby 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 all other like empowered.

SIGNATURE: SEKA KAPLAREVIC

ASEC

01/26/2011

Electronic Signature of Signing Officer or Director

Date