

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002527

FILED
Apr 22, 2009
Secretary of State

Entity Name: INVEST FINANCIAL CORPORATION INSURANCE AGENCY INC. OF ILLINOIS

Current Principal Place of Business:

314 BURR RIDGE PKWY.
BURR RIDGE, IL 60527

New Principal Place of Business:

Current Mailing Address:

1 CORPORATE WAY
ATTN: TAX DEPT S35
LANSING, MI 48951

New Mailing Address:

FEI Number: 36-3325488 **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: P/D () Delete
Name: NIEDERMEIER, LYNN
Address: 8745 HENDERSON RD., SUITE 300
City-St-Zip: TAMPA, FL 33634

Title: SVP () Delete
Name: HUFF, BRENT
Address: 3778 LAVISTA RD., SUITE 100
City-St-Zip: TUCKER, GA 30084

Title: AS () Delete
Name: BURGESS, RUTH
Address: 8745 HENDERSON RD., SUITE 300
City-St-Zip: TAMPA, FL 33634

Title: AVP () Delete
Name: BRESLIN, MICHAEL
Address: 314 BURR RIDGE PKWY.
City-St-Zip: BURR RIDGE, IL 60527

Title: S/D () Delete
Name: MEYER, THOMAS J
Address: 1 CORPORATE WAY
City-St-Zip: LANSING, MI 48951

Title: D () Delete
Name: LIVINGSTON, JAMES
Address: 7601 TECHNOLOGY WAY
City-St-Zip: DENVER, CO 80237

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:

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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 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: THOMAS J. MEYER

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04/22/2009

Electronic Signature of Signing Officer or Director

Date