

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003513

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** OLD REPUBLIC INSURED CREDIT SERVICES, INC.

**Current Principal Place of Business:**

307 N. MICHIGAN AVE.  
CHICAGO, IL 60601

**New Principal Place of Business:**

**Current Mailing Address:**

307 N. MICHIGAN AVE.  
CHICAGO, IL 60601

**New Mailing Address:**

**FEI Number:** 36-2349718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 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: C  
Name: ZUCARO, ALDO  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

Title: SD  
Name: LEROY, SPENCER III  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

Title: D  
Name: MUELLER, KARL W  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

Title: P  
Name: MILAZZO, LEONARD  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

Title: VP  
Name: BRAUER, CARL H  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

Title: T  
Name: BOONE, CHARLES S  
Address: 307 N. MICHIGAN AVE.  
City-St-Zip: CHICAGO, IL 60601

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: CARL H. BRAUER

VP

03/26/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date