

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90800 043 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000000417

1. Entity Name

PHH INSURANCE ASSOCIATES CORPORATION

Principal Place of Business

Mailing Address

123 N WACKER DR
CHICAGO IL 60606

TAX DEPT
PO BOX 8264
CHICAGO IL 60680

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

06-1316146

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

CORPORATION SERVICE COMPANY
1200 S PINE ISLAND ROAD
PLANTATION FL 33324

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/D
NAME GARVIN, KEVIN ☐ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE V
NAME BAER, JEROME I ☐ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE S
NAME JESCHKE, ARLENE ☐ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE T
NAME HARDY, ARLENE H ☒ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE C/D
NAME FOYS, ROBERT M ☐ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE D
NAME RICE, MICHAEL D ☒ Delete
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE T
NAME AIGOTTI, DIANE ☐ Change ☒ Addition
STREET ADDRESS 123 N WACKER DR
CITY - ST - ZIP CHICAGO IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jerome I Baer*

JEROME I. BAER VP-TAXES 4/25/01

312-701-3600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #