

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004519

Entity Name: QRS-BOND, INC.

FILED
Mar 10, 2011
Secretary of State

Current Principal Place of Business:

TWO N. RIVERSIDE PLAZA, STE 400
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

TWO N. RIVERSIDE PLAZA, STE 400
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4101686

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: P
Name: NEITHERCUT, DAVID
Address: TWO NORTH RIVERSIDE PLAZA, STE 450
City-St-Zip: CHICAGO, IL

Title: VP
Name: PARRELL, MARK
Address: TWO NORTH RIVERSIDE PLAZA, STE 450
City-St-Zip: CHICAGO, IL

Title: S
Name: LAPELLE, MICHELLE
Address: TWO NORTH RIVERSIDE PLAZA
City-St-Zip: CHICAGO, IL

Title: VD
Name: STROHM, BRUCE C
Address: TWO NORTH RIVERSIDE PLAZA, STE 450
City-St-Zip: CHICAGO, IL

Title: VD
Name: NEITHERCUT, DAVID J
Address: TWO NORTH RIVERSIDE PLAZA, STE 450
City-St-Zip: CHICAGO, IL

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: MICHELLE LAPELLE

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03/10/2011

Electronic Signature of Signing Officer or Director

Date