

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000006724 (6)

1. Corporation Name  
SETTLEMENT OPTIONS, INC.

Principal Place of Business

CNA PLAZA  
C/O STATUTORY REPORTING - 21S  
CHICAGO IL 60685  
US

Mailing Address

CNA PLAZA  
C/O STATUTORY REPORTING - 21S  
CHICAGO IL 60685  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1996

4. FEI Number

13-3244872

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDC ☐ DELETE

NAME NELSON, JAMES W  
STREET ADDRESS 1255 BROOK CROSSING CT.  
CITY-ST-ZIP NAPLerville IL 60564

TITLE VS ☒ DELETE

NAME LOWRY, DONALD M  
STREET ADDRESS 79 MARK DR.  
CITY-ST-ZIP HAWTHORNE WOODS IL 60047

TITLE VPT ☐ DELETE

NAME NATHAN, LEW  
STREET ADDRESS CNA PLAZA  
CITY-ST-ZIP CHICAGO IL

TITLE V ☐ DELETE

NAME GEORGE-RATZ, MARGE  
STREET ADDRESS 2204 ELM TREE LANE  
CITY-ST-ZIP CROWN POINT IN 46307

TITLE V ☐ DELETE

NAME ROESER, JOHN  
STREET ADDRESS 1682 TRAFALGAR LANE  
CITY-ST-ZIP AURORA IL 60504

TITLE V ☐ DELETE

NAME KUZMA, PETER  
STREET ADDRESS 634 FERNFIELD CIR.  
CITY-ST-ZIP WAYNE PA 19087

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

S

Mary A. Ribikawskis

CNA PLAZA

CHICAGO, IL 60685

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Cathy J. Pierce*

Cathy J. Pierce

4-1-98

312-822-4255

CR2E034 (10/97)

**SETTLEMENT OPTIONS, INC.**

**OFFICERS**

<i>Chairman of the Board and President</i>	<i>James W. Nelson</i>
<i>Vice President and Treasurer</i>	<i>Lew Nathan</i>
<i>Vice President</i>	<i>Marge George-Ratz</i>
<i>Vice President</i>	<i>John Roeser</i>
<i>Vice President</i>	<i>Peter Kuzma</i>
<i>Vice President and Assistant Treasurer</i>	<i>Pamela S. Dempsey</i>
<i>Assistant Vice President</i>	<i>Cathy J. Pierce</i> ✓
<i>Assistant Vice President and Assistant Secretary</i>	<i>Daniel J. Rohan</i>
<i>Secretary</i>	✓ <i>Mary A. Ribikawskis</i>
<i>Assistant Secretary</i>	<i>Robert J. Grob</i>
<i>Assistant Secretary</i>	<i>Robert D. Winkenbach</i>

**DIRECTORS**

*Dennis H. Chookaszian*  
*James Flood*  
*James W. Nelson*  
*William H. Sharkey, Jr.*