

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001123

FILED
Mar 14, 2011
Secretary of State

Entity Name: AMERICAN BAR INSURANCE PLANS CONSULTANTS, INC.

Current Principal Place of Business:

321 N CLARK ST
14TH FLOOR
CHICAGO, IL 60654

New Principal Place of Business:

Current Mailing Address:

321 N CLARK ST
14TH FLOOR
CHICAGO, IL 60654

New Mailing Address:

FEI Number: 36-3650005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: E
Name: BEAR, WILLIAM R
Address: 321 N CLARK 14TH FLOOR
City-St-Zip: CHICAGO, IL 60654

Title: P
Name: ANDREWS, J D
Address: 1201 THIRD AVENUE 40TH FLOOR
City-St-Zip: SEATTLE, WA 98101

Title: T
Name: WILLIAM, PAUL
Address: 20 NORTH BROADWAY
City-St-Zip: OKLAHOMA CITY, OK 73102

Title: V
Name: RICHMOND, ALICE
Address: 36 BRIMMER STREET
City-St-Zip: BOSTON, MA 02108

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: WILLIAM R. BEAR

EXEC

03/14/2011

Electronic Signature of Signing Officer or Director

Date