2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F97000004183 Apr 12, 2000 8:00 am Secretary of State 1. Entity Name INVESTIGATIVE OPTIONS, INCORPORATED 04-12-2000 90078 026 ***150.00 Mailing Address Principal Place of Business CNA PLAZA CNA PLAZA STATUTORY REPORTING 2#8= 9S CHICAGO IL 60685 CHICAGO IL 60685-0001 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36~4175448 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SO PINE ISLAND RD PLANTATION FL 33324 Zip Code City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. X Addition **▼** Delete TIT! F ☐ Change TITLE Peter P. Conway FLOOD, JAMES NAME NAME CNA Plaza **CNA PLAZA 40S** STREET ADDRESS STREET ADDRESS Chicago, IL 60685 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60685 Addition PD ☐ Change ☐ Delete TITLE TITLE WILLIAMS, JAY S NAME STREET ADDRESS **CNA PLAZA 40S** STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60685 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE MINELLA, MICHAEL NAME NAME **CNA PLAZA 40S** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60685 ☐ Defete ☐ Change Addition TITLE TITLE KLOC, JOHN D NAME NAME CNA PLAZA 40S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60685 CITY-ST-ZIE

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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IE

Robert J.

CNĀ Plaza

CNA Plaza

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

HARMS, STEVEN

CNA PLAZA 40S

CHICAGO IL 60685

KEATING, WILLIAM

CHICAGO IL 60685

CNA PLAZA 40S

Robertり. Grob

Delete

Delete

4/4/2000

Grob

Chicago, IL 60685

Chicago, IL 60685

Mary A. Ribikawskis

312-822-5194

Daytime Phone i

CR2E034 (9/99)

X Addition

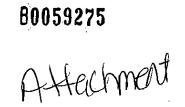
☐ Addition

☐ Change

☐ Change



OFFICERS & DIRECTORS OF INVESTIGATIVE OPTIONS, INC.



OFFICERS

Chairman of the Board President & Chief Executive Officer Senior Vice President Vice President, Secretary & Treasurer Assistant Vice President & Assistant Treasurer Assistant Vice President & **Assistant Secretary**

Peter P. Conway Jay S. Williams Michael W. Kooken Michael A. Minella

Pamela S. Dempsey John D. Kloc Robert J. Grob Warren Cox Jim Bonk Paul E. Clapper Ronald A. Carignan

Mary A. Ribikawskis

DIRECTORS

Peter P. Conway Michael A. Minella Jay S. Williams

Address for all the above: **CNA Plaza** Chicago, IL 60685

7/99