



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90061 023 ***150.00

DOCUMENT # F99000002954 1. Entity Name CHASE INSURANCE AGENCY SERVICES, INC.					
Principal Place of Business 111 E. WISCONSIN AVE., SUITE 1100 MILWAUKEE, WI 53202			Mailing Address 111 E. WISCONSIN AVE., SUITE 1100 MILWAUKEE, WI 53202		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 39-1610807	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT BURGER, CORRINEAM 1111 POLARIS PKWY SUITE OHI-1062 COLUMBUS, OH 43240	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORRINE M BURGER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOCTER, JOHN J 111 EAST WISCONSIN AVE WI-2151 MILWAUKEE, WI 53202	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	111 EAST WISCONSIN AVE WI1-2010 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FINK, MARK J 201 NORTH WALNUT ST DEI-1170 WILMINGTON, DE 19801	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PANTALEO, LAURA A 270 PARK AVE NYI-K280 NEW YORK, NY 10017	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS TERWILLEGER, KENNETH B 2500 WESTFIELD DR ILI-6052 ELGIN, IL 60124	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10 SOUTH DEARBORN IL1-0290 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DROZEK, FRANK J 10 SOUTHU DEARBORN ILI-03080 CHICAGO, IL 60603	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10 SOUTH DEARBORN IL1-0308 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Frank J Drozek</u> <u>04-04-08</u> 312-407-8060 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

Attachment: FL Annual Report
Chase Insurance Agency, Inc.
Control No: F9000002954

40066166

Directors and Officers:

Corrine M Burger
D/SVP/T

1111 Polaris Parkway OH1-1062
Columbus OH 43240

John J Docter
AVP

111 East Wisconsin Avenue WI1-2010
Milwaukee WI 53202

Marc J Fink
VP

201 North Walnut Street DE1-1170
Wilmington DE 19801

Marie I Jordan
AS

10 South Dearborn IL1-0290
Chicago IL 60603

Laura A Pantaleo
D/P

270 Park Avenue NY1-K280
New York NY 10017

Kenneth B Terwilleger
D/SVP/S

10 South Dearborn IL1-0290
Chicago IL 60603

Frank J Drozek
Authorized Signer

10 South Dearborn IL1-0308
Chicago IL 60603