

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G01178

1. Entity Name

BBC ASSOCIATES, INC.

FILED

00 MAR -8 PM 2:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1 KEMPER DR  
TAX ACCTG K-8  
LONG GROVE IL 60049-0001  
US

1 KEMPER DR  
TAX ACCTG. K-8  
LONG GROVE IL 60049-0001  
US

2. Principal Place of Business

One Kemper Drive

3. Mailing Address

One Kemper Drive

Suite, Apt. #, etc.

Legal C-3

Suite, Apt. #, etc.

Legal C-3

City & State

Long Grove, IL

City & State

Long Grove, IL

Zip

60049

Country

U.S

Zip

60049

Country

U.S

4. FEI Number

36-3246744

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME CURRAN, ROBERT M  
STREET ADDRESS 1 KEMPER DRIVE  
CITY-ST-ZIP LONG GROVE IL 01 ☐ Delete

TITLE ST  
NAME SMITH, RICHARD  
STREET ADDRESS ONE KEMPER DRIVE  
CITY-ST-ZIP LONG GROVE IL 60049 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

*Robert M. Curran* Robert M. Curran

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-00

Date

847-320-2000

Daytime Phone #

CR2F034 (9/99)

2



ACCOUNT NO. : 072100000032

REFERENCE : 614417 4728366

AUTHORIZATION : *Patricia Pizuto*

COST LIMIT : \$ 150.00

ORDER DATE : March 7, 2000

ORDER TIME : 10:06 AM

ORDER NO. : 614417-030

CUSTOMER NO: 4728366

CUSTOMER: Mr. Joseph Funk  
Kemper  
Legal Dept C-3  
1 Kemper Drive  
Long Grove, IL 600490000

ANNUAL REPORT FILING

NAME: BBC ASSOCIATES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: ~~Wendy L. Collazo~~ *Erika Carlson*

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
00 MAR -8 AM 11:23  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA