2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 26, 2005 8:00 am Secretary of State

AITHOAL ILLI OILI						secretary of State			
DOCUMENT # M9900001379 1. Entity Name ALLSTATE FINANCIAL ADVISORS, LLC					04-26-2005 90022 048 ****50.00				
Principal Place of Business 3100 SANDERS ROAD NORTHBROOK, IL 60062		Mailing Address 3075 SANDERS ROAD SUTIE H2C - Y. MCCABE NORTHBROOK, IL 60062					00 (4 05)0: (10 5 0 11)11 (7 0)0	19182) H1 1831	
2. Principal Place of Business		3. Mailing Address			-				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03222005	Chg-LLC	CR2E083 (10/03)	
City & State		City & State			4. FEI Num 36-43	ber 13823	i	Applied For Not Applicable	
Zip	Country	Zip Country		try	5. Certificat	e of Status Desired	S5.00 A		
	6. Name and Address of Current F	Registered Agent			7. Name an	d Address of New Ro	egistered Agent		
C T CORPORATION SYSTEM				Name					
1200 SOU	TH PINE ISLAND ROAD ON, FL 33324			Street Address	(P.O. Box Num	ber is Not Acceptable)		
		City				FL Zip Co	ode		
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or registe	ered agent, or b	oth, in the State of Flo	rida. I am familiar wit	h, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	E: Registere	d Agent signature require	ed when reinstating)		DATE		
Fi D	ling Fee is \$50.00 ue by May 1, 2005					Make check payable to Florida Department of State			
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOUNDS, JOHN CARL 3100 SANDERS ROAD NORTHBROOK, IL 60062	☐ Delets	TITLE NAM STRE	I			☐ Change	Addition	
TITLE NAME STREET ADDRESS	MGR SLAWIN, KEVIN R 6 PARKWAY NORTH, STE. 100	☐ Delete	TITLE	E			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	NORTHBROOK, IL 60062 MGR VELOTTA, MICHAEL J 3100 SANDERS ROAD	☐ Delete	TITLE NAM STRE	ET ADDRESS			☐ Change	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SYLLA, CASEY J 3100 SANDERS RD NORTHBROOK, IL 60062	☐ Delete	TITLE NAM STRE				☐ Change	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	: Addition	
TITLE		☐ Delete	TITLE	Ε			☐ Change	Addition	

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: MICHAEL J. VELOHA WALLE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS

CITY-ST-ZIP

4/20/05

Date

Daytime Phone #

ATTACHMENT

Directors / Officers Report

20047853

As of 4/6/2005

Allstate Financial Advisors, LLC

#M9900001379

Officers

Casey Joseph Sylla Gary E. Grose John G. Olsen Joseph Patrick Rath David A. Walsh Kenneth P. Priess Steven Carl Verney Robert C. Doebler Joanne Marie Derriq Michael Joseph Velotta Nancy M. Bufalino Barry Sajowitz Paul President
Vice President - Operations
Vice President
Vice President, General Counsel and Secretary
Vice President - Investments
Controller
Treasurer
Chief Compliance Officer
Assistant Vice President and Chief Privacy Officer
Assistant Secretary
Assistant Treasurer
Assistant Treasurer

Managers

John Carl Lounds Kevin Rourke Slawin Casey Joseph Sylla Michael Joseph Velotta

Manager Manager Manager Manager