FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT COMPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P04102

WILLIS CORROON CORPORATION OF ILLINOIS

Principal Place of Business Mailing Address 10 SOUTH LASALLE STREET 10 SOUTH LASALLE STREET Suite 3000 SUITE 3000 CHICAGO IL 60603 CHICAGO IL 60603 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State

FILED Apr 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/20/1984 4. FEI Number Applied For 36-2691200 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes ☐ No 29 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tale if applicable (NO1F: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 11 TITLE Change TITLE SULLIVAN, JOHN B. NAME 1.2 NAME 135 S LASALLE ST STREET ADDRESS 1.3 STREET ADDRESS CHICAGO IL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Secretary X Addition 2.1 TITLE HAYES, DEBORAH K Holly Gay Young NAME 2.2 NAME **26 CENTURY BLVD** 26 Century Bouelvard 2.3 STREET ADDRESS STREET ADDRESS **NASHVILLE TN** Nashville, TN 37214 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PINKSTON. KENNETH H NAME 3.2 NAME 26 CENTURY BLVD. STREET ADDRESS 3.3 STREET ADDRESS NASHVILLE TN 37214 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE JOHNSON, BRIAN D NAME 4. 2 NAME **26 CENTURY BLVD** STREET ADDRESS 4.3 STREET ADDRESS NASHVILLE TN 32714 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 51 THLE TITLE **SCHWARTZ, BART R** 5.2 NAME NAME 26 CENTURY BLVD STREET ADDRESS 5.3 STREET ADDRESS NASHVILLE TN 37214 CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE MOONEY, C. WILLIAM NAME 6.2 NAME 26 CENTURY BLVD **6.3 STREET ADDRESS** STREET ADDRESS **NASHVILLE TN 37214** 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 ifichanged, or on an attachment with an address.