

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P20776**

(1)

1. Corporation Name  
**DESIGN BENEFIT PLANS, INC.**

Principal Place of Business

1750 E. GOLF RD.  
SCHAUMBURG IL 61073  
US

Mailing Address

1750 E GOLF ROAD  
SCHAUMBURG IL 60173  
US

FILED  
Aug 26 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/07/1988

4. FEI Number

36-3496297

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 222 Merchandise Mart Plaza

Suite, Apt. #, etc.

22  
City & State  
23 Chicago, IL

Zip

24 60654

Country

25 US

2a. Mailing Address

26 11825 N. Pennsylvania St.

Suite, Apt. #, etc.

27 A2A

City & State

28 Carmel, IN

Zip

29 46032

Country

30 US

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box is not acceptable)

83

84 City

85 Zip Code

36-3496297-08/26/98-01026-003  
\*\*\*550.00  
FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME PETER W. NAUERT

STREET ADDRESS 1750 E. GOLF ROAD

CITY-ST-ZIP SCHAUMBURG IL

TITLE VD ☒ DELETE

NAME VANVLEET, W. B

STREET ADDRESS 7250 E. ARLINGTON RD.

CITY-ST-ZIP SCOTTSDALE AZ

TITLE EVP ☒ DELETE

NAME FISCHER, CARL H.

STREET ADDRESS 20587 N MEADOW LANE

CITY-ST-ZIP BARRINGTON IL

TITLE T ☒ DELETE

NAME VICKERS, DAVID

STREET ADDRESS 1750 E. GOLF RD.

CITY-ST-ZIP SCHAUMBURG IL

TITLE S ☒ DELETE

NAME WAID, A. C III

STREET ADDRESS 1750 E. GOLF ROAD

CITY-ST-ZIP SCHAUMBURG IL

TITLE D ☒ DELETE

NAME CAVATTO, MICHAEL A

STREET ADDRESS 1750 E. GOLF RD.

CITY-ST-ZIP SCHAUMBURG IL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

1.2 NAME Thomas J. Kilian

1.3 STREET ADDRESS 11825 N. Pennsylvania St.

1.4 CITY-ST-ZIP Carmel, IN 46032

2.1 TITLE EVP/D ☒ Change ☐ Addition

2.2 NAME Rollin M. Dick

2.3 STREET ADDRESS 11825 N. Pennsylvania St.

2.4 CITY-ST-ZIP Carmel, IN 46032

3.1 TITLE EVP ☒ Change ☐ Addition

3.2 NAME Gary Michaels

3.3 STREET ADDRESS 11825 N. Pennsylvania St.

3.4 CITY-ST-ZIP Carmel, IN 46032

4.1 TITLE SVP/T ☒ Change ☐ Addition

4.2 NAME James S. Adams

4.3 STREET ADDRESS 11825 N. Pennsylvania St.

4.4 CITY-ST-ZIP Carmel, IN 46032

5.1 TITLE S ☒ Change ☐ Addition

5.2 NAME Karl W. Kindig

5.3 STREET ADDRESS 11825 N. Pennsylvania St.

5.4 CITY-ST-ZIP Carmel, IN 46032

6.1 TITLE D ☒ Change ☐ Addition

6.2 NAME Stephen C. Hilbert

6.3 STREET ADDRESS 11825 N. Pennsylvania St.

6.4 CITY-ST-ZIP Carmel, IN 46032

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 if changed, or on an attachment with an address.

SIGNATURE:

Karl W. Kindig

Karl W. Kindig 8/26/98 (30)87-6000

CR2E034 (5/98)