

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90625 022 ***150.00

558130

DO NOT WRITE IN THIS SPACE

DOCUMENT # P26000 1. Entity Name AFFINITY INSURANCE SERVICES, INC			
Principal Place of Business 123 NORTH WACKER DRIVE CHICAGO, IL 60606		Mailing Address P.O. BO 8264 CHICAGO, IL 60680-8264	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 36-3642411		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
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.			
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, 2001 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 NAME STREET ADDRESS CITY - ST - ZIP	D RICE, MICHAEL D. 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BAER, JEROME I 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HARDY, ARLENE 123 N. WACKER DRIVE CHICAGO, IL 60606 ☒ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C/D FOYS, ROBERT M. 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HANNER, JEROME S 123 N. WACKER DRIVE CHICAGO, IL 60606 ☒ Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S JESCHKE, ARLENE 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Delete		
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D GARVIN, KEVIN P. 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T AIGOTTI, DIANE 123 N. WACKER DRIVE CHICAGO, IL 60606 ☐ Change ☒ Addition		
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		
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: <i>[Signature]</i>		VP-TAXES	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (1/00)