2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

DOCUMENT# P28893

Entity Name: FIRST INSURANCE FUNDING CORP.

Current Principal Place of Business:

450 SKOKIE BLVD
SUITE 1000
NORTHBROOK, IL 60062 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3306
NORTH BROOK, IL 600653306 US

New Mailing Address:

PO BOX 3306
NORTHBROOK, IL 600653306 US

FEI Number: 36-3437365 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD
Name: DYKSTRA, DAVID A
Address: 541 SHOSHONI TRAIL
City-St-Zip: LAKE VILLA, IL 60046

Title: PD
Name: BURKE, FRANK J
Address: 610 ROBERT YORK AVE, APT 205
City-St-Zip: DEERFIELD, IL 60015

Title: SVPC
Name: PERRY, MICHELLE H
Address: 26 LOGAN TERRACE
City-St-Zip: GOLF, IL 60029

Title: EVP
Name: STEENBERG, MARK A
Address: 616 IRIS CT.
City-St-Zip: CRYSTAL LAKE, IL 60014

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE H. PERRY SVP 04/19/2011

Electronic Signature of Signing Officer or Director Date