200	0 UNIFORM BUS	INESS REPO	ORT (UBR)		08-z1 - 20	000 90213 026 *	**550.00	
DOCU	JMENT # P29303		· /			£		
	00 Cost Management Se	• ✓		FILED				
			`	_ `	00 AUG 2	I AM 9: 23	}	
j Principal Pla i	ace of Business		SECRETARY OF STATE					
CHA PLAZA 426 STATUTORY REPORTING - 846. 95 CHICAGO IL 80685		CHA PLAZA 128- STATUTORY REPORTING -245- 9 S CHICAGO IL 60685-0001			TALLAHAS	SEE FLORIDA	. ,	
2. Principal	Place of Business	1. Mailing Address CNA Plaza			.: L-,			
Suite, Apt. #, etc.		Suite, Apr. #, etc. Statutory Reporting—95			DO NOT WRITE IN THIS SPACE			
City & State		Chicago, IL 60685		4.	FE) Number		Applied For Vol Application	
Ζiρ	Country	^{Zip} 60685	Country USA	5.	Certificate of Status Desired	S8.75 A		
	6. Name and Address of Current	Registered Agent		7. 1	Name and Address of New Re	ristered Agent		
CT	CODODATION OVOTEL		Name					
	CORPORATION SYSTEM 0 S. PINE ISLAND RD.	Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324								
			City FL Zip Code			de		
8. The abov	e named entity submits this statement fo	r the purpose of changing its	registered office or regis	tered ag	ent, or both, in the State of Flori	da.		
SIGNATURE	Signature, typed or privated name of registered agent in	and title of applicabile. (NOTE	Pegistered Agent signature requi	rad when re	instating)	CATE		
9. This corp	poration is eligible to satisfy its Intangible	FILE NOW!	!! FEE IS \$150.00 :			· · · · · · · · · · · · · · · · · · ·		
Tax filing requirement and elects to do so. After MAY 1			00 Fee will be \$550.00 le to Department of S		10. Election Campaign Finar Trust Fund Contribution.	· •	00 May Be d to Fees	
11.	OFFICERS AND	DIRECTORS	12.	AD	OITIONS/CHANGES TO OFFIC	ERS AND DIRECTOF	S IN 11	
TITLE NAME	PO Robert Kublick	Delete	TITLE 'NAME			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP		•	STREET ADORESS CITY-ST-ZIP					
TITLE	VP	☐ Delete	TITLE		·	Change	Addition	
NAME	Michael L. Warren		NAME		•			
STREET ADDRESS CITY-ST-ZIP	CNA PLAZA " CHICAGO IL 60685 .		STREET ADDRESS	٠				
TITLE ·	V	☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS	Tracy A. Fritz	•	NAME					
CITY-ST-ZIP	CHICAGO IL 60685	•	STREET ADDRESS CITY-ST-ZIP					
TITLE	VI .	☐ Delete	TITLE			Change	Addition	
NAME STREET ADDRESS	DEMPSEY, PAMELA S CNA PLAZA		HAME		•			
CITY-\$1-ZIP	CHICAGO IL 60685		STREET ADDRESS CITY-ST-ZIP					
TITLE	AVP	☐ Delete	TITLE			☐ Change	Addition	
NAME	Robert Grob		NAME		•		,	
STREET ADDRESS CITY-ST-ZIP	CNA PLAZA		STREET ADDRESS					
TITLE	CHICAGO IL 60685	Delete	CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Accinic:	
NAME	Mary A. Ribikawskis	C Cett	NAME			C care	<u> </u>	
STREET ADDRESS	CNA PLAZA	,	STREET ADDRESS					
	CHICAGO IL 60685	hie film at a set of	CITY-ST-ZIP		O OTIONS Floring Comments	the annual state of the state o	formation	
of the cor	certify that the information supplied with 1 on this report or supplemental report is poration or the receiver or trustee emport 1, or on an attachment with an address, w	irue and accurate and that m	u sinnan ira chali hava iha		hai ataci se il mada under nell	1. IDail am an Africat	TO CITACIC!	
SIGNAT	$ \Omega$	grad-	Robert Grob		8/3/00	312-822-51	94	
SIGNAT		BOTED HAVE OF SICHARD OF SICES OF			-, -, -,	J12-022-J1		



RSKCO COST MANAGEMENT SERVICES, INC.

OFFICERS

Chairman of the Board
President
Senior Vice President
Senior Vice President
Senior Vice President
Senior Vice President
Vice President
Vice President
Vice President and Treasurer
Assistant Vice President

Secretary

Peter P. Conway, Jr. Robert Kublick Virginia E. Keck Judith L. Whitehouse Dana J. Leckie Tracy A. Fritz Michael L. Warren Pamela S. Dempsey Robert Grob Mary A. Ribikawskis

Directors

Peter P. Conway, Jr.
Virginia E. Keck
Robert Kublick
Judith L. Whitehouse

ADDRESS FOR ALL OFFICERS AND DIRECTORS

CNA Plaza Chicago, Illinois 60685





CNA Plaza Chicago IL 60685-0001

August 15, 2000

Secretary of State Annual Report Filing 409 East Gaines Street Tallahassee, FL 32399

Re:

Uniform Business Report and Filing Fee RSKCO Cost Management Services, Inc.

Dear Sirl Madam:

Enclosed is the completed Uniform Business Report Form and the required \$550.00 filing fee (\$550.00 if filed after May 1, 2000) for the above captioned company. I am not aware that this company was reinstated last August 17, 1999 and we never received the 2000 Uniform Business Report form before the due date, we got this form in the internet. If this reason is sufficient enough please refund us the \$400.00 late fee as soon as possible.

Your kind consideration is greatly appreciated and if you have any questions or concerns, please feel free to contact me.

Very truly yours,

Jones Muse.

Tony Musni Accountant

Statutory Reporting - 9S

(312) 822-6962