## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P40109

Title:

Name:

Address:

City-St-Zip:

DT

BRAUN, MARTÍN

1400 AMERICAN LN

SCHAUMBURG, IL 60196

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THE ZURICH SERVICES CORPORATION

FILED Apr 21, 2005 Secretary of State

Entity Nan	ne: THE ZURI	CH SERVICES CORPORATI	ON				
Current Principal Place of Business:				New Principal Place of Business:			
	RICAN LANE SURG, IL 60196	3					
Current Mailing Address:				New Mailing Address:			
1400 AMERICAN LANE SCHAUMBURG, IL 60196				1400 AMERICAN LANE T-1, FL-20 SCHAUMBURG, IL 60196			
FEI Number:	36-3839542	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certificate of S	Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
STE 600	AVID MIT TOWER BL 1, FL 32810 US						
The above in the State		ubmits this statement for the p	ourpose o	f changing it	ts registered	office or registe	ered agent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DCP () I ENGEL, JAMES 1400 AMERICAN SCHAUMBURG,			Title: Name: Address: City-St-Zip:	(	) Change ( ) Add	lition
Title: Name: Address: City-St-Zip:	S () I BOWERS, DAVII 1338 SUNVIEW WINNETKA, IL 6	LANE		Title: Name: Address: City-St-Zip:	SEC ( BOWERS, DA 1338 SUNVIE WINNETKA, II	W LANE	dition
Title: Name: Address: City-St-Zip:	VPD () I FORTUNE, MICH 26530 APPLE TE BARRINGTON, II	REE LANE		Title: Name: Address: City-St-Zip:	DVP ( BARNES, CHI 701 RT. 73S, MARLTON, N	SUITE 100	lition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID A. BOWERS SEC 04/21/2005

() Change () Addition