2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825113

Entity Name: BCS INSURANCE COMPANY

Current Principal Place of Business:

2 MID AMERICA PLAZA, SUITE 200 OAKBROOK TERRACE, IL 60181

Current Mailing Address:

2 MID AMERICA PLAZA, SUITE 200 OAKBROOK TERRACE. IL 60181 US

FEI Number: 36-6033921 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST. TALLAHASSEE, FL 32399-0000 US

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:

Name

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT / DIRECTOR Title GENERAL COUNSEL / SECRETARY /

BEACHAM, SCOTT DIRECTOR

Address 2 MID AMERICA PLAZA, SUITE 200 Name HACKETT, TERRY M.

Address 2 MID AMERICA PLAZA, SUITE 200
City-State-Zip: OAKBROOK TERRACE IL 60181

City-State-Zip: OAKBROOK TERRACE IL 60181

Title TREASURER / DIRECTOR Title DIRECTOR

Name PICKAR, SUSAN A. Name COSTELLO, PETER

Address 2 MID AMERICA PLAZA, SUITE 200 Address 2 MID AMERICA PLAZA, SUITE 200

City-State-Zip: OAKBROOK TERRACE IL 60181 City-State-Zip: OAKBROOK TERRACE IL 60181

Title DIRECTOR Title DIRECTOR

Name JACOBS, DAVID J. Name MARTIN, STEVEN S.

Address 2 MID AMERICA PLAZA, SUITE 200

City-State-Zip: OAKBROOK TERRACE IL 60181

Address 2 MID AMERICA PLAZA, SUITE 200

City-State-Zip: OAKBROOK TERRACE IL 60181

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: TERRY M. HACKETT GENERAL COUNSEL 04/13/2015

FILED Apr 13, 2015

Secretary of State

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