

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832733

Entity Name: FIRST CHICAGO LEASING CORPORATION**Current Principal Place of Business:**10 SOUTH DEARBORN, IL1-0502
CHICAGO, IL 60603**Current Mailing Address:**10 SOUTH DEARBORN, IL1-0502
CHICAGO, IL 60603 US**FEI Number: 36-2711709****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	ANSIEL, GLENN EDWARD
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	TREASURER
Name	MANOLA, ELLEN J
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	DIRECTOR AND PRESIDENT
Name	HENDERSON, YALE C
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	VP
Name	CLARK, SARAH ANNE
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	DIRECTOR
Name	REINHARD, JEREMY STEPHEN
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	SECRETARY AND VICE PRESIDENT
Name	DANERI, ANDREA BELEN
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

Title	VP
Name	EGBUNIWE, CHIKE N.
Address	10 SOUTH DEARBORN, IL1-0502
City-State-Zip:	CHICAGO IL 60603

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: CHIKE N. EGBUNIWE**VICE PRESIDENT****04/22/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date