

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003464

Entity Name: TAPESTRY SOLUTIONS, INC.**Current Principal Place of Business:**100 NORTH RIVERSIDE PLAZA
CHICAGO, IL 60606**Current Mailing Address:**100 NORTH RIVERSIDE PLAZA
CHICAGO, IL 60606 US**FEI Number: 33-0649297****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PRES
Name DEFORD, ROY S.
Address 100 NORTH RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title ASEC
Name KOUBA, TIMOTHY
Address 100 NORTH RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER
Name WOLTER , CHRISTOPHER J.
Address 100 NORTH RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

Title DIR
Name ZRUST, JAMES H
Address 100 NORTH RIVERSIDE, M/C 5003-1001
City-State-Zip: CHICAGO IL 60606

Title TREA
Name MIMS, VERETT
Address 100 NORTH RIVERSIDE PLAZA
City-State-Zip: CHICAGO IL 60606

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: CHRISTOPHER J WOLTER**ASST TREASURER****04/23/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date