2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003513

Entity Name: REPUBLIC INSURED CREDIT SERVICES, INC.

FILED
Apr 11, 2014
Secretary of State
CC0619763195

Current Principal Place of Business:

307 N. MICHIGAN AVE. CHICAGO. IL 60601

Current Mailing Address:

307 N. MICHIGAN AVE. CHICAGO, IL 60601

FEI Number: 36-2349718 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE, FL 32301 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	P	Title	SECRETARY
Name	MILAZZO, LEONARD	Name	BRAUER, CARL H
Address	307 N. MICHIGAN AVE.	Address	307 N. MICHIGAN AVE.
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601

TitleDIRECTORTitleDIRECTORNameMILAZZO, LEONARD S.NameHENRY, KEVINAddress307 N. MICHIGAN AVE.Address101 N. CHERRY ST.

City-State-Zip: CHICAGO IL 60601 City-State-Zip: WINSTON-SALEM NC 27101

Title **TREASURER** VΡ Title Name JASSO, FRANK Name TAYLOR, EMANUEL L III Address 307 N. MICHIGAN AVE. 307 N. MICHIGAN AVE. Address City-State-Zip: CHICAGO IL 60601 City-State-Zip: CHICAGO IL 60601

Title VP Title VP

NameSZCZEPKOWSKI, PHILIP MNameMATHIS, TREVA NAddress307 N. MICHIGAN AVE.Address307 N. MICHIGAN AVE.City-State-Zip:CHICAGO IL 60601City-State-Zip:CHICAGO IL 60601

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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: CARL H. BRAUER

EXECUTIVE VICE PRESIDENT/SECRETARY

04/11/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

VΡ Title Title VP

Name OUVERSON, ANNGELA M Name MARK, WYMAN B

Address 307 N. MICHIGAN AVE. Address 307 N. MICHIGAN AVE. City-State-Zip: CHICAGO IL 60601

City-State-Zip: CHICAGO IL 60601

Title DIRECTOR Title DIRESTOR

Name ZUCARO, ALDO C Name LEROY, SPENCER III Address 307 N. MICHIGAN AVE. 307 N. MICHIGAN AVE. Address

City-State-Zip: CHICAGO IL 60601 City-State-Zip: CHICAGO IL 60601