

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000005238

Entity Name: CHARON PLANNING CORPORATION**Current Principal Place of Business:**2600 KELLY ROAD, SUITE 300
WARRINGTON, PA 18976**Current Mailing Address:**500 WEST MADISON STREET
SUITE 2400
CHICAGO, IL 60661**FEI Number:** 13-4096969**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH 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	VPD
Name	MICHAEL, EVAN A
Address	340 MADISON AVENUE 20TH FLOOR
City-State-Zip:	NEW YORK NY 19173

Title	D
Name	SCHNEIDER, BRETT
Address	3400 MADISON AVENUE, 20TH FLOOR
City-State-Zip:	NEW YORK NY 10173

Title	VP
Name	LIESER, LORI M
Address	500 WEST MADISON STREET, SUITE 2400
City-State-Zip:	CHICAGO IL 60661

Title	D
Name	O'MALLEY, EDWARD A
Address	1250 CAPITAL OF TEXAS HWY S, BLDG 2 #125
City-State-Zip:	AUSTIN TX 78746

Title	PS
Name	GAVIGAN, CHRISTOPHER
Address	2600 KELLY ROAD, SUITE 300
City-State-Zip:	WARRINGTON PA 18976

Title	TREASURER
Name	HAGER, LAWRENCE
Address	2600 KELLY ROAD SUITE 300
City-State-Zip:	WARRINGTON PA 18976

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: LORI M LIESER**VICE PRESIDENT****04/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date