

**2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000002737

**Entity Name:** HOGAN MARREN BABBO & ROSE, LTD. INC.**Current Principal Place of Business:**161 N CLARK ST., SUITE 1700  
CHICAGO, IL 60601**Current Mailing Address:**161 N. CLARK ST., SUITE 1700  
CHICAGO, IL 60601 US**FEI Number:** 36-3340582**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
C/O 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	DIRECTOR
Name	BABBO, THOMAS J
Address	161 N. CLARK ST., STE 1700
City-State-Zip:	CHICAGO IL 60601

Title	DIRECTOR
Name	CARIELLO, DENNIS M
Address	40 BROAD ST, 7TH FL
City-State-Zip:	NEW YORK NY 10004

Title	DIRECTOR, TREASURER
Name	BRESNICK, BENJAMIN D
Address	161 N CLARK ST., STE 1700
City-State-Zip:	CHICAGO IL 60601

Title	DIRECTOR, SECRETARY
Name	ROSE, CHARLES P
Address	161 N. CLARK ST., STET 1700
City-State-Zip:	CHICAGO IL 60601

Title	DIRECTOR, PRESIDENT
Name	TECSON, J. MICHAEL
Address	161 N. CLARK ST., STE 1700
City-State-Zip:	CHICAGO IL 60601

Title	DIRECTOR
Name	OSGOOD, DEBORA L
Address	161 N. CLARK ST., STE 1700
City-State-Zip:	CHICAGO IL 60601

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:** J. MICHAEL TECSON**PRESIDENT****02/12/2025**

Electronic Signature of Signing Officer/Director Detail

Date