

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000000113

Entity Name: THE OPTIONS CLEARING CORPORATION**Current Principal Place of Business:**125 S. FRANKLIN STREET
SUITE 1200
CHICAGO, IL 60606**Current Mailing Address:**125 S. FRANKLIN STREET
SUITE 1200
CHICAGO, IL 60606 US**FEI Number:** 36-2756407**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEMS
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 LUPARELLO, STEPHEN
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name LITTERMAN, ROBERT R.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name LINDSEY, RICHARD R.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name LESTER, SUSAN E.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name KING, ELIZABETH K.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name KENNEDY, KEVIN
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name ISAACSON, CHRISTOPHER A.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name GOONE, DAVID S.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

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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: MEGAN MALONE COHEN**SECRETARY****04/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FRUCHER, MEYER S.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name ECKERT, KURT M.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name CARDELLO, THOMAS R.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title TREASURER
Name EARLES, DANA A.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title CFO
Name SHELLY, AMY C.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title CEO
Name DAVIDSON, JOHN P. III
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name WHITE, ALICE PATRICIA
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name FRANK, THOMAS A.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name CHIODI, MARIA
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name BOURNE, STUART M.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title SECRETARY
Name COHEN, MEGAN MALONE
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title COO
Name WARREN, SCOT E.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name YATES, WILLIAM T.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name O'FLYNN, SUSAN G.
Address 125 S. FRANKLIN STREET
SUITE 1200
City-State-Zip: CHICAGO IL 60606