#### 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002186

Entity Name: BOLLINGER INSURANCE PROGRAMS, INC.

FILED
Mar 31, 2015
Secretary of State
CC5462099318

### **Current Principal Place of Business:**

101 JFK PKWY

SHORT HILLS. NJ 07078

### **Current Mailing Address:**

101 JFK PKWY

SHORT HILLS. NJ 07078

FEI Number: 22-0781130 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	CEO, DIRECTOR	Title	VP, DIRECTOR
Name	WENNERSTRUM, STEVEN C.	Name	HANNER, JEROME S.
Address	TWO PIERCE PLACE	Address	TWO PIERCE PLACE
City-State-Zip:	ITASCA IL 60143	City-State-Zip:	ITASCA IL 60143

Title CONTROLLER Title VΡ Name CARY, RICHARD C. Name WASIKOWSKI, PAUL F. Address TWO PIERCE PLACE Address TWO PIERCE PLACE ITASCA IL 60143 City-State-Zip: ITASCA IL 60143 City-State-Zip:

Title SECRETARY, DIRECTOR Title **TREASURER** Name HANES-DOWD, APRIL Name LAZZARO. JACK H. Address TWO PIERCE PLACE TWO PIERCE PLACE Address City-State-Zip: ITASCA IL 60143 City-State-Zip: ITASCA IL 60143

Title PRESIDENT Title EXECUTIVE VICE PRESIDENT

NameCRISPO, LORI W.NameBAUER, DAVIDAddress101 JFK PKWYAddress101 JFK PKWY

City-State-Zip: SHORT HILLS NJ 07078

## Continues on page 2

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: DARLENE DENHOLLANDER

ASSISTANT SECRETARY

03/31/2015

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title VP, ASST. SECRETARY
Name DENHOLLANDER, DARLENE

Address 101 JFK PKWY

City-State-Zip: SHORT HILLS NJ 07078