2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 840743

Entity Name: ILLINOIS NATIONAL INSURANCE CO.

Current Principal Place of Business:

500 WEST MADISON STREET STE 3000 CHICAGO, IL 60661

Current Mailing Address:

175 WATER STREET NEW YORK, NY 10038 US

FEI Number: 37-0344310

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST. TALLAHASSEE, FL 32399 US

FILED Apr 27, 2018 Secretary of State CC5504058478

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Direc	ctor Detail :		
Title	SECRETARY	Title	PRESIDENT, DIRECTOR
Name	KENT, TANYA	Name	BAUGH, ALEXANDER
Address	175 WATER STREET, 15TH FLOOR	Address	175 WATER STREET, 26TH FLOOR
City-State-Zip:	NEW YORK NY 10038	City-State-Zip:	NEW YORK NY 10038
Title	TREASURER	Title	DIRECTOR
Name	CAULFIELD, JUSTIN	Name	GRABEK, STEPHEN
Address	175 WATER STREET 29TH FLOOR	Address	500 WEST MADISON STREET SUITE 3000
City-State-Zip:	NEW YORK NY 10038	City-State-Zip:	CHICAGO IL 60661
Title	DIRECTOR	Title	DIRECTOR
Name	FITZPATRICK, JOSEPH	Name	CORNELL, GEOFFREY
Address	500 WEST MADISON STREET	Address	80 PINE STREET
City-State-Zip:	SUITE 3000 CHICAGO IL 60661	City-State-Zip:	NEW YORK NY 10005
Title	DIRECTOR	Title	DIRECTOR
		Name	BRACKEN, JAMES
Name	STERN, AMY	Address	175 WATER STREET, 28TH FLOOR
Address	175 WATER STREET, 27TH FLOOR	City-State-Zip:	NEW YORK NY 10038
City-State-Zip:	NEW YORK NY 10038		
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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: TANYA KENT	SECRETARY	04/27/2018
Electropic Signature of Signing Officer/Director Datail		Data

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	FRY, CHARLES	Name	GARG, GAURAV
Address	175 WATER STREET, 20TH FLOOR	Address	175 WATER STREET, 23RD FLOOR
City-State-Zip:	NEW YORK NY 10038	City-State-Zip:	NEW YORK NY 10038
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR LAUNER, CINDY	Title Name	DIRECTOR NORMAN, SHELLEY
Name	LAUNER, CINDY 175 WATER STREET, 26TH FLOOR	Name	NORMAN, SHELLEY