

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004117

Entity Name: D.C.I. INSURANCE AGENCY INC.

Current Principal Place of Business:

11532 W 183RD ST SUITE SW
ORLAND PARK, IL 60467

Current Mailing Address:

11532 W 183RD ST SUITE SW
ORLAND PARK, IL 60467

FEI Number: 20-5280521

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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 DPT
Name CONSTANTINE, DANIEL R
Address 11532 W 183RD ST SUITE SW
City-State-Zip: ORLAND PARK IL 60467

Title DVP
Name CONSTANTINE, DAVID J
Address 11532 W 183RD ST SUITE SW
City-State-Zip: ORLAND PARK IL 60467

Title DS
Name CONSTANTINE, CARRIE A
Address 11532 W 183RD ST SUITE SW
City-State-Zip: ORLAND PARK IL 60467

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: DAVID J. CONSTANTINE

DVP

01/06/2014

Electronic Signature of Signing Officer/Director Detail

Date