BCA-5.10 | STATEMENT OF CO

NFP-105.10

OF REGISTERED AGENT **AND/OR REGISTERED OFFICE** 

FED 5691-131-6

SUBMIT IN DUPLICATE

(Rev. Jan. 1991)

George H. Ryan Secretary of State Department of Business Services FILED

This space for use by Secretary,of State

\$23.50 7:00 B17

Springfield, IL 62756 Telephone (217) 782-3647	JUN 3	0 1994	Date ()	30/94
Remit payment in check or money order, payable to "Secretary of State."		H. RYAN OF STATE	Filing Fee DEPT-01 RECOR	\$5
1. CORPORATE NAME: VAI	NGUARD INSURANC		E'TD \$5835 \$ JJ COOK COUNT	#-95-351 Y RECORDER
2. STATE OR COUNTRY OF	INCORPORATION: .	Illinois		
3. Name and address of the re- of the Secretary of Stare are	nore change);		they appear on the	records of the office
Registered Agent _0	onald A. Gillio	es		
	Fhot Maine	Middle Name		Last Name
Registered Office		Drive, Sui	te 4000	
Cl	Number hicago	Street 60606	Suite No. (A P.O. Box a	ilone is not acceptable) Cook
4. Name and address of the reg			il be (after all chang	county les herein reported):
Registered Agent D	. <u>Scott Boomers</u> First Name			
		Nichtle Name		Last Name
Fledit ed Office 2	<u>Number</u>	Stra	Suite 105	
More I I	k Brook	60521	Suite No. (A P.O. Box al Dupa	
	City	Zip Code	<b>O</b> .	County
<ol> <li>The address of the registere changed, will be identical.</li> </ol>	d office and the add	ress of the busin	ness office of the re	egistered agent, as
6. The above change was author	orized by: ("X" one bo	x only)	0.	•
الكر عالية التواقعة الإنسانيكير عالم على التواقعة الإنسانيكير التواقعة ال	pred by the board of	directors.	(Note 5)	953334444
b. By action of the regist	ered agent.		(100 b)	-0.34 V
NUTE: When the registered agen	it changes, the signal	ures of both pres	ident and secretary	and required
i (ii authorized by the board of	directors, sian here	See Note 5)		
The undersigned corporation I whom affirms, under penalties of p	185 caused this states	most to be signed	by its duly authorize true.	ed officers, each of
Dated 6.27			rance Service	s, Ltd.
attested by P. Benn	b'	- Wit	Eyact Name of Corporation	7)
(Synature of Secretary or Assistant Secretary)  JOHN P. BEAUGARD  (Type or Print Name and Title)		(Signat	rure of President of Vice Pri A Principle of Principle and Title Type or Principle and Title	esident)
(If change of registered office by re The undersigned, under penal	distered anent sinn l	Pere See Note 61	$\sim$	
Dated				
	· p	/Cianati		<del></del>

lure of Registered Agent of Record)

## **UNOFFICIAL COPY**

COOK COUNTY RECORDER DG\*EZ\$

Property of Cook County Clerk's Office