No. C 159137		Due no later than Feb 28, 2017		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		No. 2002001000000 Printed By 10000000	CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. NFS EDGE INSURANCE AGENCY, INC. BENJAMIN SETTLER 200 E RANDOLPH ST CHICAGO IL 60601		BOISE ID 8	12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter N	lames and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JOHN DICKS	ON	200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
SECRETARY	MARY MOOF	RE JOHNSON	200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
TREASURER	PAUL A HAGY		200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
DIRECTOR	MARY MOORE JOHNSON		200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
VICE PRESIDENT	MARY MOORE JOHNSON		200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
DIRECTOR	WILLIAM P VIT		200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
DIRECTOR	MICHELLE S	LEY	200 E RANDOLPH ST	CHICAGO	IL	USA	60601	
5. Organized Under the Laws of: 6. Annual Report		6. Annual Report r	nust be signed.*					
R.		Signature: MICHELLE S LEY			Date: 01/09/2017			
C 159137		Name (type or print): MICHELLE S LEY			Title: ASST VP			
Processed 01/09/2017		* Electronically pro	vided signatures are accepted as origir	nal signatures.				