

SCC eFile

**2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

214529782

1.) CORPORATION NAME:

**HANSON PROFESSIONAL SERVICES INC.**

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1110941**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1525 SOUTH 6TH ST  
CITY/ST/ZIP: SPRINGFIELD, IL 62703

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	JEFFERY T BALL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1525 SOUTH SIXTH STREET		
CITY/ST/ZIP/CO:	SPRINGFIELD, IL 62703		
NAME:	NELSON EDWARD MORALES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	SUITE 102		
CITY/ST/ZIP/CO:	720 N. MAITLAND AVENUE MAITLAND, FL 32751		
NAME:	SERGIO A PECORI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	1525 S SIXTH STREET		
CITY/ST/ZIP/CO:	SPRINGFIELD, IL 62703		
NAME:	ROBERT W CUSICK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/CTO		
ADDRESS:	1525 S 6TH STREET		
CITY/ST/ZIP/CO:	SPRINGFIELD, IL 62703		
NAME:	JO ELLEN KEIM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SR VP/CFO/T		
ADDRESS:	1525 SOUTH SIXTH STREET		
CITY/ST/ZIP/CO:	SPRINGFIELD, IL 62703		
NAME:	JOHN P COOMBE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/S/COO		
ADDRESS:	1525 S 6TH ST		
CITY/ST/ZIP/CO:	SPRINGFIELD, IL 62703		

NAME: JOHN W. MCCREE TITLE: DIRECTOR ADDRESS: 1525 SOUTH SIXTH STREET CITY/ST/ZIP/CO: SPRINGFIELD, IL 62703	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: EUGENE R WILKINSON TITLE: DIRECTOR ADDRESS: 1525 SOUTH SIXTH STREET CITY/ST/ZIP/CO: SPRINGFIELD, IL 62703	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JEFFERY T BALL	JEFFERY T BALL, PRESIDENT	6/10/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.