

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213560654

1.) CORPORATION NAME:

**DANE ACQUISITION CORP.**

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1278474**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 222 N. LASALLE ST.  
STE. 1000

CITY/ST/ZIP: CHICAGO, IL 60601

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:	WILLIAM H. CROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	222 N. LASALLE ST. STE. 1000		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	JAMES S. CROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	222 N. LASALLE ST. STE. 2000		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	A. STEVEN CROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	222 N. LASALLE ST. STE. 2000		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	MICHAEL S. CANMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AS/T		
ADDRESS:	222 N. LASALLE ST. STE. 1000		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	LESTER CROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	222 N. LASALLE ST. STE. 2000		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		

NAME: CHARLES H. GOODMAN TITLE: VP/AS ADDRESS: 222 N. LASALLE ST. STE. 2000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: WILLIAM C. KUNKLER III TITLE: VP/AS ADDRESS: 222 N. LASALLE ST. STE. 1000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: DAVID M. RUBIN TITLE: VP/GC/SEC ADDRESS: 222 N. LASALLE ST. STE. 1000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JOHN J. SOBOTA TITLE: VP/AS/CONTROLL ADDRESS: 222 N. LASALLE ST. STE. 1000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: R. SCOTT ASHLEY TITLE: DIV CONTROLLER ADDRESS: 602 E. LATHROP AVE. CITY/ST/ZIP/CO: SAVANNAH, GA 31415	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: BRIAN B. GILBERT TITLE: ASST SECRETARY ADDRESS: 222 N. LASALLE ST. STE. 800 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: CHUCK WAGNER TITLE: BRANCH MANAGER ADDRESS: 6710 E. MARTIN LUTHER KING BLVD. CITY/ST/ZIP/CO: TAMPA, FL 33619	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: DEAN ENGALAGE TITLE: VICE PRESIDENT ADDRESS: 222 N. LASALLE ST. STE. 1000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MAUREEN FLYNN TITLE: VICE PRESIDENT ADDRESS: 222 N. LASALLE ST. STE. 1000 CITY/ST/ZIP/CO: CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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/ BRIAN B. GILBERT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRIAN B. GILBERT, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE
12/26/2013 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.