

1.) CORPORATION NAME:

AMERICAN BAR ENDOWMENT

DUE DATE: **1/31/2011**

SCC ID NO: **F1456120**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
RODERICK B MATHEWS
1001 HAXALL POINT 12TH FL
RICHMOND, VA 23219**

5.) STOCK INFORMATION

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| CLASS | AUTHORIZED |
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 321 NORTH CLARK STREET
14TH FLOOR

CITY/ST/ZIP: CHICAGO, IL 60654-7648

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.

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| | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | I S LEEVY JOHNSON | | | |
| TITLE: | DIRECTOR | | | |
| ADDRESS: | PO BOX 1431 | | | |
| CITY/ST/ZIP/CO: | COLUMBIA, SC 29202- | | | |

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| | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | N. LEE COOPER | | | |
| TITLE: | PRESIDENT | | | |
| ADDRESS: | 1901 6TH AVENUE N STE 2400 | | | |
| CITY/ST/ZIP/CO: | BIRMINGHAM, AL 35203-2618 | | | |

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| | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | CHRISTOPHER L. GRIFFIN | | | |
| TITLE: | VICE PRESIDENT | | | |
| ADDRESS: | 100 NORTH TAMPA STE 2700 | | | |
| CITY/ST/ZIP/CO: | TAMPA, FL 33602-5891 | | | |

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| | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | CHARLES M THOMPSON | | | |
| TITLE: | DIRECTOR | | | |
| ADDRESS: | BOX 777 | | | |
| CITY/ST/ZIP/CO: | PIERRE, SD 57501- | | | |

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| | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | MARTHA BARNETT | | | |
| TITLE: | TREASURER | | | |
| ADDRESS: | 315 S. CALHOUN ST. | | | |
| CITY/ST/ZIP/CO: | TALLAHASSEE, FL 32301- | | | |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | LEE EDMON DIRECTOR 111 N. HILL STREET ROOM 204 LOS ANGELES, CA 90012- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | LINDA KLEIN EX-OFFICIO 3414 PEACHTREE RD.N.E. SUITE 1600 ATLANTA, GA 30326-1153 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | WILLIAM C HUBBARD EX-OFFICIO PO BOX 11070 COLUMBIA, SC 29211- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | RODERICK B. MATHEWS DIRECTOR 1001 HAXALL POINT 12TH FLOOR RICHMOND, VA 23219- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | PATRICIA REFO DIRECTOR 400 E. VAN BUREN ST. PHOENIX, AZ 85004-2223 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | ALICE RICHMOND EX-OFFICIO 39 BRIMMER STREET BOSTON, MA 02108- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | WILLIAM T. ROBINSON EX-OFFICIO 7310 TURFWAY RD. SUITE 210 FLORENCE, KY 41042- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | HOWARD H. VOGEL DIRECTOR PO BOX 217 KNOXVILLE, TN 37901- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JAMES WYNN, JR. DIRECTOR 434 FAYETTEVILLE ST. SUITE 2135 RALEIGH, NC 27601- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | J. ANTHONY PATTERSON, JR. SECRETARY 2200 ROSS AVE. SUITE 2800 DALLAS, TX 75201-2784 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | STEPHEN N. ZACK EX-OFFICIO 100 S.E. 2ND STREET SUITE 2800 MIAMI, FL 33131-2124 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JANE H. BARRETT DIRECTOR 555 W. FIFTH STREET SUITE 3500 LOS ANGELES, CA 90013-1024 | <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.

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| <u>/s/ N. LEE COOPER</u> | <u>N. LEE COOPER, PRESIDENT</u> | <u>11/8/2010</u> |
| 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.