

1.) CORPORATION NAME:

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

Prairie State Administrative Services, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1651555**

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 111 NORTH CANAL ST STE 940

CITY/ST/ZIP: CHICAGO, IL 60606

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.

<p>NAME: MARY PATRICIA JOYCE TITLE: PRESIDENT ADDRESS: 111 NORTH CANAL STREET STE 940 CITY/ST/ZIP/CO: CHICAGO, IL 60606</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JAMES R ELIZALDE TITLE: SR VP ADDRESS: 111 NORTH CONEL ST, ST 940 CITY/ST/ZIP/CO: CHICAGO, IL 60606</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: ANNE GALBRAITH WALESKI TITLE: TREASURER ADDRESS: 4521 HIGHWOODS PKWY CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: KATHLEEN ANNE STURGEON TITLE: SECRETARY ADDRESS: TEN PARKWAY NORTH CITY/ST/ZIP/CO: DEERFIELD, IL 60015</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: FRANCIS MICHAEL CROWLEY TITLE: DIRECTOR ADDRESS: 4600 COX ROAD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060</p>	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DEWEY MICHAEL JONES TITLE: DIRECTOR ADDRESS: 4521 HIGHWOODS PARKWAY CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060</p>	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR

NAME:	RICHARD REEVES WHITT III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4521 HIGHWOODS PARKWAY		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23060		

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/ KATHLEEN ANNE STURGEON	KATHLEEN ANNE STURGEON,	2/11/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.