

1.) CORPORATION NAME:

**HEALTH CARE SERVICE CORPORATION, a Mutual  
LegalReserve Company**

DUE DATE: **5/31/2015**

SCC ID NO: **F1710401**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 EAST RANDOLPH STREET

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PATRICIA ARLENE HEMMINGWAY HALL	
TITLE:	PRES/CEO	
ADDRESS:	300 E. RANDOLPH ST	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PATRICIA ARLENE	
TITLE:	PRESIDENT	
ADDRESS:	300 EAST RANDOLPH STREET	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN MARIE ATWOOD	
TITLE:	PRESIDENT	
ADDRESS:	300 EAST RANDOLPH STREET	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARTIN GREGORY FOSTER	
TITLE:	PRESIDENT	
ADDRESS:	300 EAST RANDOLPH STREET	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL TED HAYNES	
TITLE:	PRESIDENT	
ADDRESS:	300 EAST RANDOLPH STREET	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BERT ELLIOT MARSHALL	
TITLE:	PRESIDENT	
ADDRESS:	300 EAST RANDOLPH STREET	
CITY/ST/ZIP/CO:	CHICAGO, IL 60601	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK WILLIAM OWEN PRESIDENT 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KURT BRYCE SHIPLEY PRESIDENT 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY RICHARD TIKKANEN PRESIDENT 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBORAH L DORMAN-RODRIGUEZ SVP/CLO/ SEC 300 E RANDOLPH ST CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERARD THOMAS MALLEN TREASURER 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES ROBERT CORRIGAN DIRECTOR 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN LOUIS ONDRA DIRECTOR 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARLIN RAY PERRYMAN DIRECTOR 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH SIMON AVNER SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY SCOTT BRANTZ SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	C. BRIAN CHARLTON ASST SECRETARY 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROLYN HAWKINS CLIFT SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROLYN LOUISE DAWSON SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	COLLEEN FOLEY REITAN COO/ EVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN GREGORY EVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN RICHARD HEDBERG SVP/ CIO 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERESA LYNN KLINE SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS CHARLES LUBBEN SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NAZEEN RAZI SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIMMY DARREN RODGERS SVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH SIMON CFO 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAULA AMY STEINER EVP 300 EAST RANDOLPH STREET CHICAGO, IL 60601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	AUSTIN JAMES WALDRON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	PATRICIA ARLENE HEMINGWAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	DIANNE BREWER GASBARRA MD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	TIMOTHY L. BURKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 E. RANDOLPH ST		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	MILTON CARROLL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 E. RANDOLPH ST		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	WANETA COESTER TUTTLE PH.D.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	MICHELLE LYNN COLLINS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	TIEMAN HENRY DIPPEL JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	DENNIS JOSEPH GANNON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 E. RANDOLPH ST		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	THOMAS RUSSELL HIX	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		
NAME:	ROBERT THORBURN CLARKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 EAST RANDOLPH STREET		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601		

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.

<u>/s/ C. BRIAN CHARLTON</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>C. BRIAN CHARLTON, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>5/13/2015</u> DATE
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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.