

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213525579

1.) CORPORATION NAME:

Schiff, Kreidler-Shell, Inc.

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**INSURANCE CENTER OF WINCHESTER, INC.
728 S LOUDOUN STREET
P O BOX 3470**

SCC ID NO: **F1753237**

5.) STOCK INFORMATION

CLASS AUTHORIZED

WINCHESTER, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

WINCHESTER CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: TWO PIERCE PLACE
20TH FLOOR

CITY/ST/ZIP: ITASCA, IL 60143

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: THOMAS J. GALLAGHER OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: TWO PIERCE PLACE
CITY/ST/ZIP/CO: ITASCA, IL 60143

NAME: APRIL HANES-DOWD OFFICER DIRECTOR
TITLE: SECRETARY
ADDRESS: TWO PIERCE PLACE
CITY/ST/ZIP/CO: ITASCA, IL 60143

NAME: JACK H. LAZZARO OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: TWO PIERCE PLACE
CITY/ST/ZIP/CO: ITASCA, IL 60143

NAME: JAMES S. GAULT OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: TWO PIERCE PLACE
CITY/ST/ZIP/CO: ITASCA, IL 60143

NAME: LISA A. COYNE OFFICER DIRECTOR
TITLE: ASSISTANT VP
ADDRESS: TWO PIERCE PLACE
CITY/ST/ZIP/CO: ITASCA, IL 60143

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/ LISA A.COYNE LISA A.COYNE, 5/30/2013
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.