



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

| 1. Entity ID No. 21751 | 2. Exact name of CAPITAL I | | ERVICES INC. | | | | | |
|--|---|---|---|--|--------------------------|--------------------|---|--|
| 3. Principal office address | 1 | | City | | State | Zip | | |
| 4. Business Phone No. | | | Elmhurs | | IL | 60(1 | <i>حا</i> لــــــــــــــــــــــــــــــــــــ | |
| 4. Business Phone No. 224-880-7000 | | | 5. State of Incorporation NEVADA | | | | | |
| 6. Brief description of the charact GENERAL PURPOSE C | ORPORATION | | | | | | | |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR A President Name | | | | | | | | |
| KATHRYN MADISON | | | Vice-President Name JOHN P GRIFFIN | | | | | |
| Street Address 961 WEIGEL DR | | | Street Address 1421 W. SHURE DR. STE 100 | | | | | |
| City ELMHURST | State IL | Zip 60126 | City ARLINGTON HEIGHTS State | | | Zip 60004 | | |
| Secretary Name LYNNE ZAREMBA | | | Treasurer Name JOHN P GRIFFIN | | | | | |
| Street Address 1421 W. SHURE DR. STE 100 | | | Street Address 1421 W. SHURE DR. STE 100 | | | | | |
| ARLINGTON HEIGHTS | State IL | Zip 60004 | ARLINGTON H | EIGHTS | State IL | Zip 6000 | 4 | |
| 8. LIST ALL DIRECTORS (NAM | ES AND ADDRES | SES) ("X" BOX FOR | | | | | | |
| Director Name KATHRYN MADISON | | | Director Name | | | | | |
| Street Address 961 WEIGEL DR | | | Street Address RPC | | | | | |
| City ELMHURST | State IL | Zip 60126 | City State | | | Zipl | RATI | |
| Director Name | | | Director Name | | | | | |
| Street Address | | | Street Address | | | | | |
| City | State | Zip | City | State Zip | | | | |
| 9. SHARES AUTHORIZED | ARES AUTHORIZED | | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) | | | | |
| | | | NUMBER OF SHARES | CLASS/SE | | PAR VALUE | | |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. | | | 100 | C | OMMON | \$1.00 | | |
| This report must be executed on to | behalf of the corpo his report must be e | ration by an authorize executed on behalf of | ed representative. If the the corporation by the i | corporation in the contract of | s in the hands ustee. | of a receiver of | or trustee, | |
| File Date | | | Under penalty of p this report, includi and that all statem | ng any acco | mpanying so | chedules and | statements, | |
| Check No | | וו בר | 11/1/ | | | 3/ | 1/16 | |
| Ву: | | ILED | Signature of Author | - | | | Date | |
| FOR SECRETARY OF STATE U | ISE ONLY | 0 9 2016 | RICK L BEHNI | | | | | |
| orm No. 630 levised: 01/2012 | •••• | 11:5 | Print or Type Name | of Authorize | d Representa | tive | | |

CAPITAL FINANCIAL SERVICES INC.

Directors & Officers

| Director | Kathryn Madison | | | |
|--|------------------------|--|--|--|
| Director | John P Griffin | | | |
| Descident | | | | |
| President | Kathryn Madison | | | |
| Vice President and Secretary | Lynne Zaremba | | | |
| Vice President & Treasurer & Controller | John P. Griffin | | | |
| Assistant Vice President | Joseph J. Kelly | | | |
| Assistant Vice President and General Counsel | Rose C. Mancini | | | |
| Assistant Vice President | Donald Scarcello | | | |
| Assistant Vice President | Christina A. Kozaritz | | | |
| Assistant Vice President | Phyllis I. Johnston | | | |
| Assistant Vice President | Isabel Pierri-Isabelle | | | |
| Assistant Vice President | Ashraf R. Ibrahim | | | |
| Assistant Vice President | Connie F. Rogers | | | |
| Assistant Vice President | Carin Rodemoyer | | | |
| Assistant Vice President | Mary Beth Svoboda | | | |
| Assistant Vice President | Mark LoSacco | | | |
| Assistant Vice President | Megan L. Webster | | | |
| Assistant Vice President | Quandrea Fester | | | |
| Assistant Vice President | Angela Venator | | | |
| Assistant Vice President | Rhonda Nitsche | | | |
| Assistant Vice President | Jose Churruca | | | |
| Assistant Secretary | Rose Patenaude | | | |
| Assistant Secretary | Stella M. Flores | | | |
| Assistant Treasurer | James S. Stiegel | | | |
| Assistant Treasurer | Rick L. Behnke | | | |
| Assistant Treasurer | Steven E. Smith | | | |

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

