

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **831578** (0)

1. Corporation Name
MONTGOMERY WARD AUTO CLUB, INC.



Principal Place of Business Mailing Address
% DAN BLINDAUER
200 N MARTINGALE RD
SCHAUMBURG IL 60173-9096

3. Date Incorporated or Qualified **01/07/1974** 3a. Date of Last Report **02/01/1995**
4. FEI Number **35-1310961** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BRENNAN, BERNARD F.	
STREET ADDRESS	ONE MONTGOMERY WARD PLZ	
CITY - ST - ZIP	CHICAGO IL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	GALLAGHER, RICHARD C.	
STREET ADDRESS	200 NORTH MARTINGALE RD	
CITY - ST - ZIP	SCHAUMBURG IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SCHULTZ, JACK R.	
STREET ADDRESS	200 N. MARTINGDALE RD.	
CITY - ST - ZIP	SCHAUMBURG IL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	EUWEMA, JOHN B.	
STREET ADDRESS	200 NORTH MARTINGALE RD.	
CITY - ST - ZIP	SCHAUMBURG IL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	MOYER, LYMAN C.	
STREET ADDRESS	200 NORTH MARTINGALE RD	
CITY - ST - ZIP	SCHAUMBURG IL	
TITLE	VI	<input type="checkbox"/> DELETE
NAME	CASEY, PATRICK J.	
STREET ADDRESS	200 N. MARTINGDALE RD.	
CITY - ST - ZIP	SCHAUMBURG IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jack R. Schultz* **JACK R. SCHULTZ** VP & Controller 01-25-96 (847) 605-4543

CR2E034 (12/95)