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**May 06, 1999 8:00 am**  
**Secretary of State**

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 831578

1. Corporation Name  
**MONTGOMERY WARD AUTO CLUB, INC.**



DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: 01/07/1974  
 4. FEI Number: 35-1310961  
 5. Certificate of Status Desired: \$8.75 Additional Fee Required  
 6. Election Campaign Financing: \$5.00 May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: EVP	NAME: MCGANN, SHELEEN	1.1 TITLE: VPC	1.2 NAME: DVER, JANICE M.
STREET ADDRESS: 200 N MARTINGALE RD	CITY-ST-ZIP: SCHAUMBURG IL 60173	1.3 STREET ADDRESS: 200 N. MARTINGALE RD.	1.4 CITY-ST-ZIP: SCHAUMBURG, IL
TITLE: PD	NAME: GALLAGHER, RICHARD C.	2.1 TITLE: CEO	2.2 NAME: LINEN, WORTHINGTON W.
STREET ADDRESS: 200 NORTH MARTINGALE RD	CITY-ST-ZIP: SCHAUMBURG IL	2.3 STREET ADDRESS: 200 N. MARTINGALE RD	2.4 CITY-ST-ZIP: SCHAUMBURG, IL
TITLE: AVP	NAME: STUBBING, WALTER E	3.1 TITLE:	3.2 NAME:
STREET ADDRESS: 200 N MARTINGALE RD	CITY-ST-ZIP: SCHAUMBURG IL 60173	3.3 STREET ADDRESS:	3.4 CITY-ST-ZIP:
TITLE: VS	NAME: EUWEMA, JOHN B.	4.1 TITLE:	4.2 NAME:
STREET ADDRESS: 200 NORTH MARTINGALE RD.	CITY-ST-ZIP: SCHAUMBURG IL	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:
TITLE: AS	NAME: MOYER, LYMAN C.	5.1 TITLE:	5.2 NAME:
STREET ADDRESS: 200 NORTH MARTINGALE RD	CITY-ST-ZIP: SCHAUMBURG IL	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE: VT	NAME: CASEY, PATRICK J.	6.1 TITLE:	6.2 NAME:
STREET ADDRESS: 200 N. MARTINGALE RD.	CITY-ST-ZIP: SCHAUMBURG IL	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: *[Signature]* 4-23-99  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)