

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Jim Smir,
Secretary of State
DIVISION OF CORPORATIONS

Corporation Name
UNIVERSAL OIL PRODUCTS COMPANY

**DOCUMENT #
833930 (1)**

Principal Place of Business
**25 E. ALGONQUIN ROAD
DES PLAINES IL 60017**

Principal Place of Business
**25 E. ALGONQUIN ROAD
DES PLAINES IL 60017**

**APPROVED
AND
FILED**

1995 MAY -1 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**900001484569
-05/11/95--01092--002
****200.00 ****200.00**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **03/05/1975** 3c. Date of Last Report **05/01/1994**

4. FEI Number **36-2824643** Approved For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required** 6.

7. Nonprofit Exempt from \$138.75 Supplemental Fee **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under 5. 199.032, Florida Statutes Yes No

If above addresses are incorrect in any way, line through incorrect information and enter correction below

1. Mailing Address		2a. Principal Place of Business	
25		25	
2. Suite, Apt. #, etc.		2b. Suite, Apt. #, etc.	
27		27	
3. City & State		3c. City & State	
28		28	
4. Zip	Country	4a. Zip	Country
25		29	30

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

1. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____

2. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 1995	
1. TITLE	A/T	11. TITLE	
2. NAME	RODER, EDWARD, T	12. NAME	
3. STREET ADDRESS	25 E. ALGONQUIN ROAD	13. STREET ADDRESS	
4. CITY-STATE	DES PLAINES IL	14. CITY-STATE-ZIP	
1. TITLE	A/S	21. TITLE	
2. NAME	PARRY, WILLIAM E.	22. NAME	DELETE PARRY
3. STREET ADDRESS	25 E. ALGONQUIN ROAD	23. STREET ADDRESS	
4. CITY-STATE	DES PLAINES IL	24. CITY-STATE-ZIP	
1. TITLE	V/D	31. TITLE	
2. NAME	LAWRENCE, H. G.	32. NAME	
3. STREET ADDRESS	25 E ALGONQUIN RD	33. STREET ADDRESS	
4. CITY-STATE	DES PLAINES IL	34. CITY-STATE-ZIP	
1. TITLE	S	41. TITLE	
2. NAME	VAN DE KERCKHOVE, MICHAEL	42. NAME	
3. STREET ADDRESS	25 E. ALGONQUIN ROAD	43. STREET ADDRESS	
4. CITY-STATE	DES PLAINES FL	44. CITY-STATE-ZIP	
1. TITLE	P/D	51. TITLE	
2. NAME	WINFIELD, MICHAEL D.	52. NAME	
3. STREET ADDRESS	25 E. ALGONQUIN ROAD	53. STREET ADDRESS	
4. CITY-STATE	DES PLAINES IL	54. CITY-STATE-ZIP	
1. TITLE	T	61. TITLE	
2. NAME	DAVIDSON, GEORGE J.	62. NAME	
3. STREET ADDRESS	25 E ALGONQUIN RD	63. STREET ADDRESS	
4. CITY-STATE	DES PLAINES FL	64. CITY-STATE-ZIP	

I, the undersigned, 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 release the Secretary of State and the Corporation from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I have fulfilled my obligations concerning the annual report as required by Chapter 717, Florida Statutes; and that my name appears in Block 11 or Block 13 if changed, or on an attachment thereto as required by Chapter 717 of Chapter 617, Florida Statutes; and that my name appears in Block 11 or Block 13 if changed, or on an attachment thereto as required by Chapter 717 of Chapter 617, Florida Statutes.

SIGNATURE: *Edward T. Roder* EDWARD T. RODER 4/26/95 (708) 391-2087