


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90095 004 ***158.75

DOCUMENT # P12337
 1. Entity Name
ROBERTSON-CECO CORPORATION



Principal Place of Business 2626 WARRENVILLE ROAD SUITE 400 DOWNERS GROVE, IL 60515 US	Mailing Address 2626 WARRENVILLE ROAD SUITE 400 DOWNERS GROVE, IL 60515 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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40022941



02212006 Chg-P CR2E034 (11/05)

4. FEI Number 36-3479146	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title 4 applicable. (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> Delete
NAME	SAGE, II A	
STREET ADDRESS	1730 LAKEHOUSE DRIVE	
CITY-ST-ZIP	N. PALM BEACH, FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	ROSKOVENSKY, E A	
STREET ADDRESS	4295 QUAIL RUN PLACE	
CITY-ST-ZIP	DANVILLE, CA	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	HEISLEY, MICHAEL E	
STREET ADDRESS	2626 WARRENVILLE ROAD SUITE 400	
CITY-ST-ZIP	DOWNERS GROVE, IL 60515	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WOLSKI, LARRY	
STREET ADDRESS	2626 WARRENVILLE RD. SUITE 400	
CITY-ST-ZIP	DOWNERS GROVE, IL 60515	
TITLE	AS	<input type="checkbox"/> Delete
NAME	MEADOWS, STANLEY H	
STREET ADDRESS	2626 WARRENVILLE RD. SUITE 400	
CITY-ST-ZIP	DOWNERS GROVE, IL 60515	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	SHUDY, KEVIN	
STREET ADDRESS	2626 WARRENVILLE RD STE 400	
CITY-ST-ZIP	DOWNERS GROVE, IL 60515	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Chairman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sage, Andrew G. C. II	
STREET ADDRESS	1730 Lakeshore Drive	
CITY-ST-ZIP	N. Palm Beach, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin J. Shudy Kevin J. Shudy 2/21/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #