

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 22, 2002 8:00 am
Secretary of State

07-22-2002 90158 018 ***150.00

DOCUMENT # P20234
 1. Entity Name
JOHN P. PEARL & ASSOCIATES, LTD., INCORPORATED

Principal Place of Business
1200 E. GLEN AVE.
PEORIA HEIGHTS IL 61614-5348

Mailing Address
1200 E. GLEN AVE.
PEORIA HEIGHTS IL 61614-5348



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip
61616-5348

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
61616-5348

4. FEI Number **37-0817309**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
PRENTICE-HALL CORPORATION SYSTEM, INC.
1202 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301

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 if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	PEARL, JOHN P.	
STREET ADDRESS	1200 E. GLEN AVE.	
CITY-ST-ZIP	PEORIA HEIGHTS IL 61614-5348	
TITLE	P	<input type="checkbox"/> Delete
NAME	PEARL, GARY P	
STREET ADDRESS	1200 E. GLEN AVE.	
CITY-ST-ZIP	PEORIA HEIGHTS IL	
TITLE	S	<input type="checkbox"/> Delete
NAME	HAGEMANN, JAMES M.	
STREET ADDRESS	1200 E. GLEN AVE.	
CITY-ST-ZIP	PEORIA HEIGHTS IL 61614-5348	
TITLE	DT	<input type="checkbox"/> Delete
NAME	RETZER, EUGENE F.	
STREET ADDRESS	1200 E. GLEN HEIGHTS	
CITY-ST-ZIP	PEORIA HEIGHTS IL 61614-5348	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

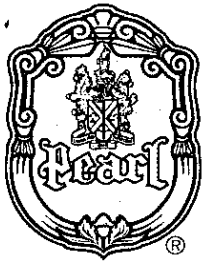
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John P. Pearl* **7-15-02** **309-688-9000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)



Attachment
#P20234

B0130033

John P. Pearl & Associates, Ltd.
INSURANCE

1200 EAST GLEN AVENUE • PEORIA HEIGHTS, IL 61614-5348 • (309) 688-9000
FAX (309) 688-5444 • <http://www.pearlins.com>

July 12, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir:

We did not receive prior notice for the UBR this year. I phoned the number on the form today and the representative I spoke with stated we could just pay the \$150.00 fee. She stated we would not be charged the \$400.00 late fee.

Thank you, for all your help. Please send all future UBR to Mary Helms SILAA, Licensing & Compliance Manager at the above address and payment will be sent promptly.

Sincerely,

JOHN P. PEARL & ASSOCIATES, LTD.

James M. Hagemann
Corporate Secretary