FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 849030 (2)

1. Corporation Name
AMBCO CAPITAL CORPORATION

Principal Place of Business	Mailing Address
1501 WOODFIELD ROAD SUITE 300E SCHAUMBURG IL 60173-3000	1501 WOODFIELD ROAD SUITE 300E SCHAUMBURG IL 60173-3000

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/04/1981
3a. Date of Last Report: 02/11/1994

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

4. FEI Number: 36-2816344 ☐ 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

9. Name and Address of Current Registered Agent

GILSON, THEODORE
% GILSON, ROBERT
5345 SOUTHWICK DR
TAMPA FL 33824

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	CARR, JOHN P	12 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	13 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10006	14 CITY ST ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	SULLIVAN, LAWRENCE	22 NAME	
STREET ADDRESS	625 BRIERHILL ROAD	23 STREET ADDRESS	
CITY ST ZIP	DEERFIELD IL 60015	24 CITY ST ZIP	
TITLE	VSD	31 TITLE	V/T/D ☒ Change ☐ Addition
NAME	PERSKY, BURTON	32 NAME	PERSKY, BURTON
STREET ADDRESS	6509 N WASHTENNAW	33 STREET ADDRESS	6509 N. WASHTENAW
CITY ST ZIP	CHICAGO, IL 00000 60645	34 CITY ST ZIP	CHICAGO, IL 60645
TITLE	PD	41 TITLE	☐ Change ☐ Addition
NAME	PHELAN, FRANCIS J	42 NAME	
STREET ADDRESS	301 MARTINGALE DR	43 STREET ADDRESS	
CITY ST ZIP	BARTLETT, IL 00000 60103	44 CITY ST ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	HASKOWITZ, HOWARD	52 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	53 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10006	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	YERRILL, VICTOR M	62 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	63 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10006	64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: _____ (708)330-3082
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #

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AMBCO CAPITAL CORPORATION

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Block 12 - Continuation:

	Title	D
	Name	Joseph L. Zarandona
	Street Address	61 Broadway, 33rd Floor
	City, State, Zip Code	New York, New York 10006

Block 13 - Continuation:

7.1.	Title	S
7.2.	Name	Thomas J. Gardner
7.3.	Street Address	1700 Edison Drive
7.4.	City, State, Zip Code	Milford, Ohio 45150