

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT
CORPORATION
ANNUAL REPORT
1998**



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

DOCUMENT # P12697 (9)
1. Corporation Name
ATLAS ELECTRIC DEVICES CO.

FILED
Apr 15 1998 8:00am
Secretary of State



Principal Place of Business
**4114 N RAVENSWOOD AVE
CHICAGO IL 60613
US**

Mailing Address
**C/O MR FRANK G REEDER
222 N LASALLE ST 26TH FL
CHICAGO IL 60601-6003**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/29/1986

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		36-0754510		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		222 N. LaSalle St., 25th Floor			
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		Chicago, IL			
Zip		Country		Zip		Country	
24		25		29 60601-1003		30 USA	
9. Name and Address of Current Registered Agent				10. Name and Address of New 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
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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, WILLIAM W.	1.2 NAME	
STREET ADDRESS	4114 N. RAVENSWOOD AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGLE, CHARLENE B.	2.2 NAME	
STREET ADDRESS	4114 N. RAVENSWOODS AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSON, SHERMAN R	3.2 NAME	
STREET ADDRESS	4114 N. RAVENSWOOD AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REDMOND, JAMES J	4.2 NAME	
STREET ADDRESS	4114 N. RAVENSWOOD AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LANE, PAMELA C.	5.2 NAME	
STREET ADDRESS	4114 N. RAVENSWOOD AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	J. WILLIAM ALLEN	6.2 NAME	
STREET ADDRESS	4114 N RAVENSWOOD AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	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 in an attachment with an address.

CR2E034 (10/97)

ATLAS ELECTRIC DEVICES CO.

Profit Corporation Annual Report for 1998

Block 12 (continued). Additions to Officers and Directors

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR JOHNSON, GWYNETH L. 4114 N. RAVENSOOD AVE. CHICAGO, IL 60613
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR JOUTRAS, RICHARD L. 4114 N. RAVENSOOD AVE. CHICAGO, IL 60613
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR ROBERTS, JOHN H. 4114 N. RAVENSWOOD AVE. CHICAGO, IL 60613