

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 017109 (0)

1. Corporation Name
THE CORPORATION COMPANY



Principal Place of Business 1200 S. PINE ISLAND RD. PLANTATION FL 33324 US	Mailing Address 2700 LAKE COOK RD RIVERWOODS IS 60015
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 06/23/1925	
4. FEI Number 51-0099484	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	VAN WEL, PETER	1.2 NAME	van Wel, Peter
STREET ADDRESS	2700 LAKE COOK ROAD	1.3 STREET ADDRESS	161 N. Clark St, 48th Floor
CITY-ST-ZIP	RIVERWOODS IL 60015	1.4 CITY-ST-ZIP	Chicago, IL 60601
TITLE	VSTD	2.1 TITLE	VSTD
NAME	LENZ, BRUCE C	2.2 NAME	Lenz, Bruce C.
STREET ADDRESS	2700 LAKE COOK RD	2.3 STREET ADDRESS	161 N. Clark St, 48th Floor
CITY-ST-ZIP	RIVERWOODS IL 60015	2.4 CITY-ST-ZIP	Chicago, IL 60601
TITLE	VD	3.1 TITLE	VP
NAME	STAATERMAN, ROBYN	3.2 NAME	Cartwright, Christopher
STREET ADDRESS	1209 ORANGE STREET	3.3 STREET ADDRESS	1633 Broadway
CITY-ST-ZIP	WILMINGTON DE	3.4 CITY-ST-ZIP	New York, NY 10019
TITLE	P	4.1 TITLE	
NAME	MCKINSTRY, NANCY	4.2 NAME	
STREET ADDRESS	1833 BROADWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10019	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	
NAME	BOUTLIER, ANN	5.2 NAME	
STREET ADDRESS	1200 S. PINE ISLAND ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	5.4 CITY-ST-ZIP	
TITLE	AT	6.1 TITLE	
NAME	HEALY, PETER F	6.2 NAME	
STREET ADDRESS	183 BRAINTREE DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGDALE IL 60108	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 on an attachment with an address

SIGNATURE _____

CFR2E034 (10/97)