

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90165 026 \*\*\*150.00

DOCUMENT # 830737

1. Corporation Name

A.L. DOUGHERTY CO., INC.

Principal Place of Business

SUITE 200J TOWNE CENTRE  
2 E. MAIN STREET  
DANVILLE IL 61832

Mailing Address

SUITE 200J TOWNE CENTRE  
2 E. MAIN STREET  
DANVILLE IL 61832

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/29/1973

4. FEI Number

35-0376627

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

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

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

☐ DELETE

TITLE PTD  
NAME DOUGHERTY, PHYLLIS K.  
STREET ADDRESS 20 COUNTRY CLUB DR.  
CITY-ST-ZIP DANVILLE IL

TITLE VD  
NAME DOUGHERTY, CHARLOTTE K.  
STREET ADDRESS 16 AMBASSADOR DRIVE  
CITY-ST-ZIP DANVILLE IL

TITLE AT  
NAME UNGARI, SARA D  
STREET ADDRESS 831 FRANKLIN  
CITY-ST-ZIP DOWNERS GROVE IL

TITLE S  
NAME NICKEL, RENEE  
STREET ADDRESS 3564 S CATES ROAD  
CITY-ST-ZIP KINGMAN IN

TITLE AS  
NAME DOUGHERTY, A L  
STREET ADDRESS 20 COUNTRY CLUB DR  
CITY-ST-ZIP DANVILLE IL 61832

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE VD  
2.2 NAME DOUGHERTY, CHARLOTTE K.  
2.3 STREET ADDRESS 3220 INDEPENDENCE DRIVE #214  
2.4 CITY-ST-ZIP DANVILLE, IL 61832

3.1 TITLE AT  
3.2 NAME UNGARI, SARA D.  
3.3 STREET ADDRESS 4930 SEELEY AVENUE  
3.4 CITY-ST-ZIP DOWNERS GROVE, IL 60515

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE AS  
5.2 NAME DOUGHERTY, ALLEN LANCE  
5.3 STREET ADDRESS 6337 S. COLLEGE  
5.4 CITY-ST-ZIP TEMPE, AZ 85283

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/30/99

(217)443-3151

Date

Daytime Phone #

CR2E034 (1/198)