

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90120 045 ***158.75

DOCUMENT # 832102

1. Entity Name
R.T. MILORD CO.



Principal Place of Business
**9801 S. INDUSTRIAL DRIVE
BRIDGEVIEW, IL 60455**

Mailing Address
**9801 S. INDUSTRIAL DRIVE
BRIDGEVIEW, IL 60455**

50026506



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02252005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

36-2355396

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**MILORD, JEROME F
3600 S CONGRESS AVE I
BOYNTON BCH., FL 33426**

7. Name and Address of New Registered Agent

Name **William J. Milord**

Street Address (P.O. Box Number is Not Acceptable)

3600 S. Congress Ave.

Suite I

City

Boynton Beach

FL

Zip Code
33426

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

William J. Milord

-William J. Milord - Director

3/11/05

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

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VD** ☒ Delete
NAME **MILORD, JEROME**
STREET ADDRESS **3600 S CONGRESS AVE I**
CITY-ST-ZIP **BOYNTON BCH., FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **MILORD, PAUL J**
STREET ADDRESS **9801 S INDUSTRIAL DR**
CITY-ST-ZIP **BRIDGEVIEW, IL 00000,**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MILORD, WILLIAM J.**
STREET ADDRESS **3600 S CONGRESS AVE I**
CITY-ST-ZIP **BOYNTON BEACH, FL**

TITLE ☒ Change ☐ Addition
NAME **William J. Milord**
STREET ADDRESS
CITY-ST-ZIP

TITLE **VSD** ☐ Delete
NAME **MILORD, KEVIN T.**
STREET ADDRESS **9801 SO. INDUSTRIAL DR.**
CITY-ST-ZIP **BRIDGEVIEW, IL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **THOMAS, MICHAEL R**
STREET ADDRESS **9801 S INDUSTRIAL DRIVE**
CITY-ST-ZIP **BRIDGEVIEW, IL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **MILORD, PHILIP J**
STREET ADDRESS **9801 S INDUSTRIAL DRIVE**
CITY-ST-ZIP **BRIDGEVIEW, IL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William J. Milord

3/11/05

708-598-7900

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #