


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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90082 034 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 333956			
1. Corporation Name MID-COUNTY SERVICES, INC.			
Principal Place of Business 2335 SANDERS RD P. O. BOX 4100 NORTHBROOK IL 60062 US		Mailing Address 2335 SANDERS RD P. O. BOX 4100 NORTHBROOK IL 60062 US	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Zip 24		Zip 29	
Country 25		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 85 Zip Code FL			
11. Pursuant to the provisions of Sections 607.0501 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			
TITLE	CEO	<input type="checkbox"/> DELETE	
NAME	CAMAREN, JAMES		
STREET ADDRESS	2335 SANDERS RD		
CITY-ST-ZIP	NORTHBROOK IL		
TITLE	VS	<input checked="" type="checkbox"/> DELETE	
NAME	DEMAREE, DAVID H.		
STREET ADDRESS	2335 SANDERS RD		
CITY-ST-ZIP	NORTHBROOK IL		
TITLE	P	<input type="checkbox"/> DELETE	
NAME	SCHUMACHER, LAWRENCE		
STREET ADDRESS	2335 SANDERS RD		
CITY-ST-ZIP	NORTHBROOK IL		
TITLE	VP	<input type="checkbox"/> DELETE	
NAME	WENZ, CARL		
STREET ADDRESS	2335 SANDERS RD		
CITY-ST-ZIP	NORTHBROOK IL		
TITLE	VP	<input type="checkbox"/> DELETE	
NAME	DOPUCH, ANDREW		
STREET ADDRESS	2335 SANDERS RD		
CITY-ST-ZIP	NORTHBROOK IL		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE	VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME	Dopuch, Andrew		
5.3 STREET ADDRESS	2335 Sanders Road		
5.4 CITY-ST-ZIP	Northbrook, IL 60062		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew Dopuch

4/20/99

Daytime Phone #

CR2E034 (11/98)