

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 333956**

1. Entity Name

Mid-County Services, Inc.

Principal Place of Business

Mailing Address

2335 Sanders Road
Northbrook, IL 60062

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1229280

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

00058480

6. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution ☐ Added to Fees

11. OFFICERS AND DIRECTORS

TITLE CEO ☐ Delete
NAME Camaren, James
STREET ADDRESS 2335 Sanders Road
CITY-ST-ZIP Northbrook, IL 60062TITLE P ☐ Delete
NAME Schumacher, Lawrence
STREET ADDRESS 2335 Sanders Road
CITY-ST-ZIP Northbrook, IL 60062TITLE VP ☐ Delete
NAME Wenz, Carl
STREET ADDRESS 2335 Sanders Road
CITY-ST-ZIP Northbrook, IL 60062TITLE VS ☐ Delete
NAME Dopuch, Andrew
STREET ADDRESS 2335, Sanders Road
CITY-ST-ZIP Northbrook, IL 60062TITLE VP ☐ Delete
NAME Carter, David
STREET ADDRESS 2335 Sanders Road
CITY-ST-ZIP Northbrook, IL 60062TITLE VP ☐ Delete
NAME Rasmussen, Donald
STREET ADDRESS 200 Weathersfield Ave
CITY-ST-ZIP Altamonte Springs, FL

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew Dopuch

4/2/01 847-498-6440

Date

Daytime Phone #

CR2E034 (11/00)