



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 431404		
1. Entity Name DRAPER AND KRAMER OF FLORIDA, INC.		
Principal Place of Business 33 WEST MONROE STREET 19TH FL CHICAGO, IL 60603		Mailing Address 33 WEST MONROE STREET 19TH FL CHICAGO, IL 60603
DO NOT WRITE IN THIS SPACE		
		 04182006 No Chg-P CR2E034 (11/05)
4. FEI Number 36-2775916		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAILEY, FORREST D 33 W MONROE ST., 19TH FL. CHICAGO, IL 60603	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD FORD, FREDERICK C 33 W MONROE ST CHICAGO, IL 60603	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MADSEN, LORRAINE N 33 W MONROE ST CHICAGO, IL 60603	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KRAMER, ANTHONY F 33 W MONROE ST CHICAGO, FL 60603	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ESTELA, CARMEN T 33 W MONROE ST CHICAGO, IL 60603	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Lorraine N. Madsen</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>April 19, 2006</u> Daytime Phone # <u>312-795-2220</u>