

2002 UNIFORM BUSINESS REPORT (UBR) 0959

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90871 021 ***150.00

DOCUMENT # 512704

1. Entity Name
MILES GRANT WATER AND SEWER COMPANY

Principal Place of Business

2335 SANDERS ROAD
NORTHBROOK IL 60062

Mailing Address

2335 SANDERS ROAD
NORTHBROOK IL 60062

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
25-0877540

Applied For
Not Applicable

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

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
CAMAREN, JAMES
2335 SANDERS ROAD
NORTHBROOK IL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.
SCHUMACHER, LAWRENCE
2335 SANDERS ROAD
NORTHBROOK IL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WENZ, CARL
2335 SANDERS RD
NORTHBROOK IL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
DOPUCH, ANDREW
2335 SANDERS RD
NORTHBROOK IL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CARTER, DAVID
2335 SANDERS ROAD
NORTHBROOK IL 60062 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RASMUSSEN, DONALD
200 WEATHERSFIELD AVE
ALTAMONTE SPRINGS FL ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairman & CEO ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President & CFO ☒ Change ☐ Addition

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

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

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

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

13. 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 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

Date

Daytime Phone #

4/18/02

847-498-6440

CR2E034 (9/01)