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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 597345

(8)

Principal Plac 3500 E FLET(SUITE 509	e of Business CHER AVENUE	Mailing Address 111 N WABASH AVENU SUITE 1516	E		
TAMPA FL 33 US	∞13≪79 1	CHICAGO IL 60602 US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 12/14/1978	SPACE
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 58-1345960	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	_	🔀 Yes 🔲 No
9. Name and Address of Current Registered Agent PULLMAN, LEONARD 125 N SANDYHOOK ROAD SARASOTA FL JL 33581			81 Name 82 Street Add 83	10. Name and Address of New Registered dress (P.O. Box Number is Not Acceptable)	Agent 85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Statim familiar with, and accept the obliging signature, typed or printed name of registered ag	e of Florida, Such change was gations of, Section 607,0505, F	utes, the above-named cor authorized by the corpora florida Statutes.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the apparent when reinstating) DATE.	I lost the segment of changing its registered pointment as registered.
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCOTT, ROBERT B 111 N WABASH AVE CHICAGO IL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCOTT, VIVIAN A. -111 N WABASH AVE CHICAGO IL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCOTT, ROLAND B. 12 N. PINE ST. MT. PROSPECT IL	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY CT 200		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.4 CITY - ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP		Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

i Roland B. Scott, President 01-20-98

FILED

Jan 30 1998 8:00am

Secretary of State

312-782-3558