

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90289 036 ***150.00

DOCUMENT # 800993

1. Entity Name
MIAMI CORPORATION

Principal Place of Business

Mailing Address

C/O WALTER S CARR
 410 N MICHIGAN AVE
 CHICAGO IL 60611

C/O WALTER S CARR
 410 N MICHIGAN AVE
 CHICAGO IL 60611

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **36-1472840**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BENNETT BARBARA K
95 MERRICK WAY, STE 535
CORAL GABLES FL 33134

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 State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	AT	<input type="checkbox"/> Delete
NAME	MATES, DAVID E.	
STREET ADDRESS	410 N MICHIGAN AVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BURNAP, CANDIDA D	
STREET ADDRESS	410 NO MICHIGAN AVE	
CITY-ST-ZIP	CHICAGO, IL 0	
TITLE	D	<input type="checkbox"/> Delete
NAME	O'NEIL, ABBY	
STREET ADDRESS	410 NO MICHIGAN AVE	
CITY-ST-ZIP	CHICAGO, IL 0	
TITLE	D	<input type="checkbox"/> Delete
NAME	DANIELSON, BARBARA S	
STREET ADDRESS	410 N MICHIGAN AVE, RM 590	
CITY-ST-ZIP	CHICAGO IL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SCHROEDER, CHARLES E	
STREET ADDRESS	410 NORTH MICHIGAN AVE, RM-590	
CITY-ST-ZIP	CHICAGO IL 60611	
TITLE	VT	<input type="checkbox"/> Delete
NAME	HOGAN, RICHARD F	
STREET ADDRESS	410 NORTH MICHIGAN AVE, RM 590	
CITY-ST-ZIP	CHICAGO IL 60611	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Schroeder, Charles E.	
STREET ADDRESS	410 North Michigan Avenue, Room 590	
CITY-ST-ZIP	Chicago, Illinois 60611	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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
David E. Mates

1/23/01

Date

(312) 644-6720

Daytime Phone #

CR2E034 (10/00)

MIAMI CORPORATION

UNIFORM BUSINESS REPORT - 2001

Attachment
COO13265
#800993

Additions/changes to Officers and Directors in 12

	<u>Names</u>	<u>Title</u>	<u>Street Address</u>
1.	Brooks McCormick	V/D	410 N. Michigan Ave., Chicago, IL 60611
2.	Brooker, T. Kimball	D	" "
3.	McCormick, Charlotte	D	" "
4.	Seitz III, Charles E.	D	" "
5.	Strachan, Richard	D	" "
6.	Strachan, Stephen M.	D	" "
7.	Tennille, Jocelyn D.	D	" "
8.	Trapp, James M.	D	" "
9.	Massey, Andrea	D	" "
10.	McCutcheon, Hilary H.	D	" "
11.	Whitesides, Lawson E.	P/D	" "
12.	Carr, Walter S.	V/S	" "
13.	Butler, Richard C.	V	" "
14.	Friedrichs, Michael R.	V	" "
15.	Wogan, Gordon L.	V	" "
16.	Coventry, Jan F.	AT	" "
17.	Goering, Barbra	AS	" "
18.	Gagliardi, Patricia A.	AT	" "