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

PROFIT CORPORATION ANNUAL REPORT 1998



Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # 804819

(1)

BITUMINOUS CASUALTY CORPORATION

FILED Feb 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						P 100120 Inits Sait maber stear train rate mant arate arate arate arate rant			
•		C/O ROBERT RAINEY							
C/O ROBERT 320 18TH STR		320 18TH STREET							
ROCK ISLAND IL 61201		ROCK ISLAND IL 61201				DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualified 11/06/1937 			
9 Principal Pla	ace of Business	2a, Mailing Address				4. FEI Number		Applied For	
21	ace of prosiness	26				36-0810360		Not Applicable	
Suite, Apt	V, etc	Suite, Apt #, etc.						Additional	
22		27				5. Certificate of Status Desired	Fee	Required	
City & State	1	City & State				Election Campaign Financing		May Be	
23		28	···-			Trust Fund Contribution		d to Fees	
Zıp	Country	Ζ φ	Cour	ntry		8. This corporation owes or has paid the cur	rent year∃ ∐Yes	Intangible No	
24	25 g. Name and Address of Currer	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registered A		110	
		it Ledistated Adeit		81	Name	10. Mario dila Addiesa di Non Tragistata I	194711		
	RTON INSURANCE OF FL.		1						
2 ELGIN PARKWAY NE SUITE 33				82 Street Address (P.O. Box Number is Not Acceptable)					
	WALTON BEACH FL 32549		<u> </u>	83		444			
т1.	TALION DESCRIPTION			_			1051 7	n Codo	
			į	84	City	FL	85 Zi	p Code	
11. Pursuant t	o the provisions of Sections 607.050	2 and 607 1508, Florida Statut	es, the ab	ove	named cor	rporation submits this statement for the purpose of	changing	its registered	
office or re agent 1 ar	egistered agent, or both, in the State in familiar with, and accept the oblig	ations of Section 607.0505, Fk	orida Stati	ules	the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	OII III II II II	as registered	
SIGNATURE ,						uited whon reinstaling) DATE			
	Signature, typed or printed name of registered ag-	cut and tille diapplicable (NOT ID DIRECTORS	E Registered	1 Age	nt signature requ	olited when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
12.	C	DELETE	1,1 (1)	īt F		ADDITIONS/CHANGES TO OTTICENS AND	Chang		
NAME	LARDNER.PETER		1.2 NA						
STREET ADDRESS	320-18TH ST.				ADDRESS				
CITY-ST-ZIP	ROCK ISLAND IL		1.4 CH			ROCK ISland, IL W20	1		
TITLE	Р	DELETE	21 111				Chang	e ¿Additio	
NAME	SANTRY, JAMES		2.2 NA	ME					
STREET ADDRESS	320-18TH ST		2.3 ST	REET	ADDRESS	^ · . · . · .			
CITY-ST-ZIP	ROCK ISLAND, ILL 00000		2 4 C	ITY-S	šT-ZiP	ROCK ISLAND, ILLEID	\mathcal{L}		
TITLE	VT	☐ DELETE	3 1 TIT	TLE		•	Chang	je Additio	
NAME	RAINEY, ROBERT		3 2 NA	ME					
STREET ADDRESS	320 18TH STREET		3 3 ST	REET	ADDRESS	0 1/ + 1 1 1 1 1	201		
CITY - ST - ZIP	ROCK ISLAND IL				ST-ZIP	ROCK ISLAND, IL LOL	201	Tasso.	
TITLE	V	☐ DELETE	4.1 TIT				Chang	je 🛂 Additio	
NAME	ATOR, ROBERT G		4. 2 N						
STREET ADDRESS	320-18TH ST.				ADDRESS	ROCK ISLAND, IL 6	130:1	}	
CITY-ST-ZIP	ROCK ISLAND IL	T onese	4.4 00		T-ZIP	VOOL TOTALLI IN O	17 Char	e Additio	
TIFLE	V	☐ DELETE	5.1 Til				LJ CHAIL	∪ااا∪⊍•ستوسا تم	
NAME	SNODGRASS, WILLIAM A		5.2 NA						
STREET ADDRESS	320-18TH ST.				ADDRESS	ROCK ITSIAM, IL G	120	1	
CITY-ST-ZIP	ROCK ISLAND IL	DELETE	5.4 CI		J - ZIP	NUCY LESTANTIF G	Charv	ne Additio	
TITLE	V CIMIDOLIICT IAMEO W	LT OFFICE	6.1 TF				VIIGIN	y	
NAME	SUNDQUIST, JAMES W		62 NA		4000FGG	^			
STREET ADDRESS	320-18TH ST.				ADDRESS	Rack TSland 11 1	elac	M	
CITY-ST-ZIP	ROCK ISLAND IL	with this tiling doze not gootily (T-ZIP			the information	

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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 one of attributed with an elicinest.

GNATURE: