

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # ~~807831~~ (1) **807832**

1. Corporation Name

NATIONAL ADVERTISING COMPANY

Principal Place of Business

Mailing Address

**6850 S. HARLEM AVE
BEDFORD PARK, IL 60501**

**3M CENTER
INCOME TAX BLDG. 220-6E-02
ST. PAUL, MN 55144-1000**

200001807532
-05/04/96--01003--022
***200.00

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **3M CENTER**

22 City & State

27 **INCOME TAX, BLDG. 220-6E-02**

23 Zip

Country

28 **ST. PAUL, MN**

24 Zip

Country

29 **55144-1000**

30 Country

3. Date Incorporated or Qualified

3a. Date of Last Report

02/28/1949

05/01/1995

4. FEI Number

36-2360530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition
1.2 NAME **OSMON, D.R.**
1.3 STREET ADDRESS **3M CENTER**
1.4 CITY-ST-ZIP **ST. PAUL, MN 55144-1000**

2.1 TITLE ☒ Change ☒ Addition
2.2 NAME **VPD**
2.3 STREET ADDRESS **JOHNSON, M. A.**
2.4 CITY-ST-ZIP **3M CENTER**

3.1 TITLE ☒ Change ☒ Addition
3.2 NAME **D**
3.3 STREET ADDRESS **FALCO, J.M.**
3.4 CITY-ST-ZIP **6850 S. HARLEM AVE**

4.1 TITLE ☒ Change ☒ Addition
4.2 NAME **T**
4.3 STREET ADDRESS **BURGSTAHLER, R.J.**
4.4 CITY-ST-ZIP **3M CENTER**

5.1 TITLE ☒ Change ☒ Addition
5.2 NAME **S**
5.3 STREET ADDRESS **KENEVAN, E.D.**
5.4 CITY-ST-ZIP **6850 S. HARLEM AVE**

6.1 TITLE ☒ Change ☒ Addition
6.2 NAME **AS**
6.3 STREET ADDRESS **SHAHEEN, J.N.**
6.4 CITY-ST-ZIP **6850 S. HARLEM AVE**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(k), 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, as added, or on an attachment with an address.

SIGNATURE:

G. P. Halbach

G. P. HALBACH, Asst. Treasurer

4/25/96

Date Daytime Phone

CR2E034 (12/95)

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NATIONAL ADVERTISING COMPANY
OFFICER/DIRECTOR LISTING FOR 1995/96

<u>NAME</u>	<u>TITLE</u>	<u>BUSINESS ADDRESS</u>
<u>OFFICERS</u>		
D.R. OSMON	CHAIRMAN OF THE BOARD & PRESIDENT	3M CENTER ST. PAUL, MN 55144
M.A. JOHNSON	VICE PRESIDENT & GENERAL MANAGER	3M CENTER ST. PAUL, MN 55144
E.D. KENEVAN	SECRETARY	6850 S HARLEM AVE BEDFORD PARK, IL 60501
G.E. ARTHUR	ASSISTANT SECRETARY	6850 S HARLEM AVE BEDFORD PARK, IL 60501
J.J. BOHNE	ASSISTANT SECRETARY	3M CENTER ST. PAUL, MN 55144
J.N. SHAHEEN	ASSISTANT SECRETARY	6850 S HARLEM AVE BEDFORD PARK, IL 60501
J.M. FALCO	CONTROLLER & FINANCIAL MANAGER	6850 S HARLEM AVE BEDFORD PARK, IL 60501
M.L. NAGORKA	TREASURER	6850 S HARLEM AVE BEDFORD PARK, IL 60501
R.J. BURGSTAHLER	ASSISTANT TREASURER	3M CENTER ST. PAUL, MN 55144
G.P. HALBACH	ASSISTANT TREASURER	3M CENTER ST. PAUL, MN 55144

DIRECTORS

J. M. FALCO

M. A. JOHNSON

G. D. LINNERTHOOTH

D.R. OSMON

B. C. SWEET