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FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **819656** (0)
1. Corporation Name
GEORGE M. O'NEILL CORPORATION

Principal Place of Business

**1397 TIMBER DR.
ELGIN IL 60123
US**

Mailing Address

**C/O THEODORE N. SCHNELL, JR.
1250 LARKIN AVE. 2ND FL
ELGIN IL 60123
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/01/1966

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 **1250 Larkin Ave.**

Suite, Apt. #, etc.

27 **Suite 100**

28 City & State
Elgin, IL

29 Zip Country
60123 US

4. FEI Number

36-2583732

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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 607.0602 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CTD** ☐ DELETE
NAME **O'NEILL, GEORGE M.**
STREET ADDRESS **1397 TIMBER DR**
CITY-ST-ZIP **ELGIN IL**

TITLE **SD** ☐ DELETE
NAME **O'NEILL, CHARLOTTE F.**
STREET ADDRESS **1397 TIMBER DR.**
CITY-ST-ZIP **ELGIN IL**

TITLE **VD** ☒ DELETE
NAME **GOEDERT, GEORGE**
STREET ADDRESS **1397 TIMBER DR.**
CITY-ST-ZIP **ELGIN IL**

TITLE **PD** ☐ DELETE
NAME **O'NEILL, FURMAN**
STREET ADDRESS **1397 TIMBER DR.**
CITY-ST-ZIP **ELGIN IL**

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
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE: *F. Furman O'Neill* **F. FURMAN O'NEILL**

1/14/98

(847) 697-0110

CP2E034 (10/97)