**PROFIT** CORPORATION ANNUAL REPORT

1999

**DOCUMENT #** 

Principal Place of Business

1397 TIMBER DR.

**ELGIN IL 60123** 



FLORIDA DEPARTMENT OF STATE **Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

1. Corporation Name GEORGE M. O'NEILL CORPORATION

Mailing Address

1250 LARKIN AVE STE 100

**FILED** Jul 28, 1999 8:00 am Secretary of State

07-28-1999 90002 045 \*\*\*550.00

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US		ELGIN IL 60123			DO NOT WRITE IN				
		US			3. Date Incorporated or Qualified				ľ
					07/01/1966				
2. Principal	Place of Business	2a. Mailing Address		<del></del>	4. FEI Number		TT	Applied F	or
21		26			36-2583732		7	Not Appli	icable
	ot. #, etc	Suite, Apt. #, etc.> -				7	\$8.7	5-Additio	nal 👻
22		27			5. Certificate of Status Desired	٤	Fee	Required	: \
City & St	tate	City & State			6. Election Campaign Financing		\$5.0	<b>)0</b> May E	20
23		28			Trust Fund Contribution	]		ed to Fee:	
Zip	Country	Zip	Coun	itry	8. This corporation owes the current ye	ar			
24	j	· ·	30	,	Intangible Personal Property.		Yes	X No	
24	9. Name and Address of Currer	29	[30]		10. Name and Address of New Regist	=			
	9. Name and Address of Currer	It Registered Agent		81 Name	IV. Name and Address of New Rogis	orou A	301		-
· ·	T CORPORATION SYSTEM			Name					
			ļī.	82 Street Address (P.O. Box Number is Not Acceptable)					
	200 S. PINE ISLAND ROAD		L						
Pl	LANTATION FL 33324			83					'
			-	84 City			85 Z	ip Code	
			'	841 City		FL	65  2	ip Code	
11 Burning	ant to the provisions of sections 607.050	2 and 607 1508 Florida Statute	e the abo	ve-named co	progration submits this statement for the purpose	of chai	naina its	registere	ed d
office	or registered agent, or both, in the State	of Florida. Such change was a	uthorized	by the corpo	prporation submits this statement for the purpose pration's board of directors. I hereby accept the	appoint	ment as	registere	ed
agent.	I am familiar with, and accept the oblig	ations of, section 607.0505, Flo	orida Statu	ites.					ļ
SIGNATUR	RE					ATE			_
	Signature, typed or printed name of registered age			ed Agent signature	3,		DIREC	TORS IN	112
12.	<del></del>	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	42 AND			
TITLE	CTD	L DELETE	1.1 TITL	-		L	Chang	je 🚉 A	ddition
NAME	O'NEILL, GEORGE M.		1.2 NAM	Æ .	tare and the second				Ì
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CITY-ST-ZIP	ELGIN IL	`	1.4 CITY	Y-ST-ZIP					
TITLE	SD	DELETE	2.1 TITL	.E	Net		Chang	je 🔲 A	Addition
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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:** 

DOTURE REQUIRED

July, 6, 1999

847-697-0110