

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 820764 (9)

1. Corporation Name

JOHN NUVEEN & CO., INCORPORATED

Principal Place of Business

**333 WEST WACKER DRIVE
CHICAGO ILLINOIS 60606-1286
US**

Mailing Address

**333 WEST WACKER DRIVE
CHICAGO ILLINOIS 60606-1286
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1967

3a. Date of Last Report

05/01/1994

4. FEI Number

36-2639476

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite Apt. # etc.

Suite Apt. # etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM INC.
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301**

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 607.04(2) 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 607.04(2), Florida Statutes.

SIGNATURE

Signature of Agent, if different from registered agent, in this space.

Signature of Registered Agent, if different from registered agent, in this space.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	SVEEN, DONALD E
STREET ADDRESS	333 WEST WACKER DRIVE
CITY, ST, ZIP	CHIC, ILL 00000
TITLE	CD
NAME	FRANKE, RICHARD J
STREET ADDRESS	333 WEST WACKER DRIVE
CITY, ST, ZIP	CHIC, ILL 00000
TITLE	VC
NAME	RENFFLE, O. WALTER
STREET ADDRESS	333 WEST WACKER DRIVE
CITY, ST, ZIP	CHICAGO IL
TITLE	VT
NAME	STABENOW, H. WILLIAM
STREET ADDRESS	333 WEST WACKER DRIVE
CITY, ST, ZIP	CHICAGO IL
TITLE	VS
NAME	WESOLOWSKI, JAMES J.
STREET ADDRESS	333 WEST WACKER DRIVE
CITY, ST, ZIP	CHIC, ILL 00000
TITLE	EVO
NAME	DEAN, ANTHONY T
STREET ADDRESS	333 W. WACKER DR.
CITY, ST, ZIP	CHICAGO IL

1. TITLE	☒ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	- - 60606
5. TITLE	☒ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	- - 60606
9. TITLE	☒ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	- - 60606
13. TITLE	☒ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	- - 60606
17. TITLE	☒ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	- - 60606

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 139.07(3)(b), 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

H. N. Stabenow *W. H. Stabenow*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95 (312) 917-7820
DATE TELEPHONE