

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

FILED
Apr 17 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # 829026 (4)
 1. Corporation Name
CRW DEVELOPMENT CORPORATION



Principal Place of Business Mailing Address
6160 N. CICERO AVE. CHICAGO IL 60646
6160 N. CICERO AVE. CHICAGO IL 60646-4308

3. Date Incorporated or Qualified **11/17/1972** 3a. Date of Last Report **04/16/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 2181 South Foster Avenue	26 2181 South Foster Avenue	31-0790970	Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23 City & State Wheeling, IL	28 City & State Wheeling, IL	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24 Zip 60090-6506 25 Country USA	29 Zip 60090-6506 30 Country USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIES, DAVID J.	1.2 NAME	
STREET ADDRESS	6160 N. CICERO	1.3 STREET ADDRESS	2181 South Foster Avenue
CITY-STATE-ZIP	CHICAGO IL	1.4 CITY-STATE-ZIP	Wheeling, IL 60090-6506
TITLE	DVC <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UPCHURCH, PAUL H.	2.2 NAME	
STREET ADDRESS	6160 N. CICERO	2.3 STREET ADDRESS	2181 South Foster Avenue
CITY-STATE-ZIP	CHICAGO IL	2.4 CITY-STATE-ZIP	Wheeling, IL 60090-6506
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, RONALD R	3.2 NAME	
STREET ADDRESS	100 PALM HARBOR DR	3.3 STREET ADDRESS	
CITY-STATE-ZIP	VENICE FL	3.4 CITY-STATE-ZIP	
TITLE	DTS <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANISCH, JEFFREY R	4.2 NAME	
STREET ADDRESS	6160 N CICERO	4.3 STREET ADDRESS	2181 South Foster Avenue
CITY-STATE-ZIP	CHICAGO IL	4.4 CITY-STATE-ZIP	Wheeling, IL 60090-6506
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do 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: *Jeffrey R. Hanisch* **Jeffrey R. Hanisch, Secretary 4/11/97 847-259-3330**

CR2E034 (9/96)