

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

FILED
Feb 23 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 # **832102** (8)
1. Corporation Name
R.T. MILORD CO.

Principal Place of Business
**9801 S. INDUSTRIAL DRIVE
BRIDGEVIEW IL 60455**

Mailing Address
**9801 S. INDUSTRIAL DRIVE
BRIDGEVIEW IL 60455**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/03/1974	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 36-2355396	
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <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			
MILORD, JEROME F 3600 S CONGRESS AVE I BOYNTON BCH. FL 33426				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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	VD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILORD, JEROME			1.2 NAME			
STREET ADDRESS	3600 S CONGRESS AVE I			1.3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BCH. FL			1.4 CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILORD, PAUL J			2.2 NAME			
STREET ADDRESS	9801 S INDUSTRIAL DR			2.3 STREET ADDRESS			
CITY-ST-ZIP	BRIDGEVIEW, IL 00000			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILORD, WILLIAM F			3.2 NAME			
STREET ADDRESS	3600 S CONGRESS AVE I			3.3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL			3.4 CITY-ST-ZIP			
TITLE	VSD	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILORD, KEVIN T.			4.2 NAME			
STREET ADDRESS	9801 SO. INDUSTRIAL DR.			4.3 STREET ADDRESS			
CITY-ST-ZIP	BRIDGEVIEW IL			4.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	THOMAS, MICHAEL R			5.2 NAME			
STREET ADDRESS	9801 S INDUSTRIAL DRIVE			5.3 STREET ADDRESS			
CITY-ST-ZIP	BRIDGEVIEW IL			5.4 CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILORD, PHILIP J			6.2 NAME			
STREET ADDRESS	9801 S INDUSTRIAL DRIVE			6.3 STREET ADDRESS			
CITY-ST-ZIP	BRIDGEVIEW IL			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: _____

2-16-98

CR2E034 (1097)