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

FILED Apr 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 836811 (0)**NORTH AMERICAN TRAILING COMPANY** Principal Place of Business Mailing Address 2122 YORK ROAD 2122 YORK ROAD OAK BROOK IL 60521 OAK BROOK IL 60521 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/05/1976 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 36-2812327 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE MACKIE, DOUGLAS B. 1.2 NAME NAME **2122 YORK RD** STREET ADDRESS 1.3 STREET ADDRESS OAK BROOK, ILL 00000 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE **BIEMECK, BRUCE** J. 2.2 NAME NAME **2122 YORK RD** STREET ADDRESS 2.3 STREET ADDRESS OAK BROOK, ILL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE PAGENDARM, WILLIAM F. NAME 3.2 NAME 2122 YORK RD STREET ADDRESS 3.3 STREET ADDRESS OAK BROOK, ILL 00000 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE J.W. LUDWIG 4. 2 NAME NAME LAAN VAN KRONENBURG 2 STREET ADDRESS 4.3 STREET ADDRESS AMSTELVEEN, NETHRLA00000 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 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 alternative will an address.

CITY-ST-ZIP