

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 836811**

1. Entity Name

**NORTH AMERICAN TRAILING COMPANY****FILED**  
**Feb 05, 2000 8:00 am**  
**Secretary of State**

02-05-2000 90028 033 \*\*\*150.00

Principal Place of Business

Mailing Address

2122 YORK ROAD  
OAK BROOK IL 605212122 YORK ROAD  
OAK BROOK IL 60523-1930

00016410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

36-2812327

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME MACKIE, DOUGLAS B.  
STREET ADDRESS 2122 YORK RD  
CITY-ST-ZIP OAK BROOK ILTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE TV ☒ Delete  
NAME BIEMECK, BRUCE J.  
STREET ADDRESS 2122 YORK RD  
CITY-ST-ZIP OAK BROOK ILTITLE VD ☐ Change ☒ Addition  
NAME WENSEL, DEBORAH A.  
STREET ADDRESS 2122 YORK ROAD  
CITY-ST-ZIP OAK BROOK, IL 60523TITLE VD ☐ Delete  
NAME PAGENDARM, WILLIAM F.  
STREET ADDRESS 2122 YORK RD  
CITY-ST-ZIP OAK BROOK ILTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE VD ☒ Delete  
NAME J.W. LUDWIG  
STREET ADDRESS LAAN VAN KRONENBURG 2  
CITY-ST-ZIP AMSTELVEEN, NETHRLA00000TITLE VD ☐ Change ☒ Addition  
NAME R.J. VAN ROODEN  
STREET ADDRESS UTRECHTSEWEG 62  
CITY-ST-ZIP 3704 HE, ZIEST, THE NETHERLANDSTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DEBORAH A. WENSEL  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 01 2000

(630) 574-2949

Date

Daytime Phone #