2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 838460 Feb 08, 2000 8:00 am 1. Entity Name **Secretary of State** COMDISCO, INC. 02-08-2000 90040 016 ***150.00 Principal Place of Business Mailing Address 6111 N RIVER RD 6111 N RIVER RD **ROSEMONT IL 60018-5158** ROSEMONT IL 60018 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36-2687938 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **PCEC** TITLE Delete TITLE SVP SLEVIN, JOHN F. NAME ThomassJ. Huber NAME 6111 N RIVER RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROSEMONT IL **SVPS** ☐ Delete ☐ Change Addition TITLE TITLE HEWES, PHILIP A. NAME STREET ADDRESS 6111 N RIVER ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROSEMONT IL SVP/T ☐ Change **K** Addition - K∑-Delete TITLE -Edward A. Pacewicz ANDREINI, ALAN J NAME NAME 6111 N RIVER RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROSEMONT IL CITY-ST-ZIP ☐ Addition Delete ☐ Chanoe TITLE TITLE POINTIKES, WILLIAM N NAME NAME STREET ADDRESS STREET ADDRESS 6111 N RIVER ROAD CITY-ST-ZIP CITY-ST-ZIP ROSEMONT IL TITLE DCOO ☐ Delete Change Addition PONTIKES, NICHOLAS K NAME NAME STREET ADDRESS 6111 N RIVER RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROSEMONT IL **EVPC** ☐ Change ☐ Addition ☐ Delete TITLE TITLE VOSICKY, JOHN J NAME STREET ADDRESS 6111 N RIVER ROAD STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP ROSEMONT IL 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.

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SIGNATURE:

Vice President

847-698-3000

Daytime Phone #