

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**



Mailing Address  
2200 KENSINGTON COURT  
OAK BROOK, IL 60523 US

**DO NOT WRITE IN THIS SPACE**



03222007      No Chg-P      CR2E034 (11/05)

4. FEI Number	Applied For
36-0700810	Not Applicable

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

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

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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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

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

[NOTE: Registered Agent signature required when reinstating]

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	GRIFFITH, RAY A
STREET ADDRESS	2200 KENSINGTON COURT
CITY- ST- ZIP	OAK BROOK, IL 60523
TITLE	EVP
NAME	KAHLE, RITA D.
STREET ADDRESS	2200 KENSINGTON CT
CITY- ST- ZIP	OAK BROOK, IL
TITLE	SVF
NAME	MCGIVERN, ARTHUR J
STREET ADDRESS	2200 KENSINGTON COURT
CITY- ST- ZIP	OAK BROOK, IL 60523
TITLE	VPM
NAME	BOSSMAN, LORI L
STREET ADDRESS	2200 KENSINGTON CT
CITY- ST- ZIP	OAK BROOK, IL 60523
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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04/10/07-90009-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur J. McGivern

3/29/07

630-990-5975

Date \_\_\_\_\_

Daytime Phone # \_\_\_\_\_