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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. McInnam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 848007 (1)

1. Corporation Name

RYCOLINE PRODUCTS, INC.

Principal Place of Business

5540 NORTHWEST HIGHWAY  
CHICAGO IL 60630-1116

Mailing Address

5540 NORTHWEST HIGHWAY  
CHICAGO IL 60630-1116



3. Date Incorporated or Qualified  
01/21/1981

3a. Date of Last Report  
03/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALMER, CHARLES L.  
111 EAST LAS OLAS BOULEVARD  
FORT LAUDERDALE FL 33302

81 Name

CHARLES PALMER

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

312 S.E. 17th ST., SUITE 300

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33316

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 at the time of filing

Signature typed or printed name of new registered agent at the time of filing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

☒ Change ☐ Addition

TITLE

TD

NAME

PALMER, CHARLES  
111 E. LAS OLAS BLVD.  
FT. LAUDERDALE FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

S

NAME

ROCHE, JAMES M.  
111 W MONROE STREET  
CHICAGO IL

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

NAME

EDWARDS, JERRY  
693 EXMOOR TERRACE  
CRYSTAL LAKE IL

STREET ADDRESS

CITY - ST - ZIP

TITLE

AS

NAME

DIDOMENICO, VICTORIA  
8426 W CATALPA  
CHICAGO IL

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

NAME

ANDERSON, GARY A.  
30 W 110TH GLENHURST CT  
WARRENVILLE IL

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY ANDERSON

4-12-96 312-775-6755  
Date Daytime Phone #

CR2E034 (12/95)