

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Monham Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

95 MAY -1 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 849030 (2)
1. Corporation Name AMBCO CAPITAL CORPORATION

Principal Place of Business 1501 WOODFIELD ROAD SUITE 300E SCHAUMBURG IL 60173-3000	Mailing Address 1501 WOODFIELD ROAD SUITE 300E SCHAUMBURG IL 60173-3000
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/04/1981	3a. Date of Last Report 02/11/1994
4. FEI Number 36-2816344	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. This corporation has liability for intangible tax under S. 190.002, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent GILSON, THEODORE % GILSON, ROBERT 5345 SOUTHWICK DR TAMPA FL 33624
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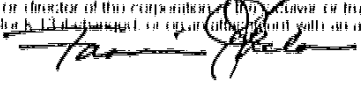
10. Name and Address of New Registered Agent 01 Name 02 Street Address (P.O. Box Number is Not Acceptable) 03 04 City FL 05 Zip Code

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 _____ DATE _____
(Signature typed or printed below of individual agent and State Registered Agent signature required after completion)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	CARR, JOHN P	1.2 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	1.3 STREET ADDRESS	
CITY, ST, ZIP	NEW YORK NY 10006	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	SULLIVAN, LAWRENCE	2.2 NAME	
STREET ADDRESS	625 BRIERHILL ROAD	2.3 STREET ADDRESS	
CITY, ST, ZIP	DEERFIELD IL 60015	2.4 CITY, ST, ZIP	
TITLE	VSD	3.1 TITLE	☒ Change ☐ Addition
NAME	PERSKY, BURTON	3.2 NAME	
STREET ADDRESS	6509 N WASHTENAW	3.3 STREET ADDRESS	
CITY, ST, ZIP	CHICAGO, IL 00000 60645	3.4 CITY, ST, ZIP	
TITLE	PD	4.1 TITLE	☐ Change ☐ Addition
NAME	PHELAN, FRANCIS J	4.2 NAME	
STREET ADDRESS	301 MARTINGALE DR	4.3 STREET ADDRESS	
CITY, ST, ZIP	BARTLETT, IL 00000 60103	4.4 CITY, ST, ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	HASKOWITZ, HOWARD	5.2 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	5.3 STREET ADDRESS	
CITY, ST, ZIP	NEW YORK NY 10006	5.4 CITY, ST, ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	YERRILL, VICTOR M	6.2 NAME	
STREET ADDRESS	61 BROADWAY, 33RD FLOOR	6.3 STREET ADDRESS	
CITY, ST, ZIP	NEW YORK NY 10006	6.4 CITY, ST, ZIP	

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)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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, the State or Indian empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or separately attached with an address.

SIGNATURE:  (708) 330-3082
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

849030

AMBCO CAPITAL CORPORATION
CORPORATION ANNUAL REPORT

1995

Block 12 - Continuation:

Title	D
Name	Joseph L. Zarandona
Street Address	61 Broadway, 33rd Floor
City, State, Zip Code	New York, New York 10006

Block 13 - Continuation:

7.1. Title	S
7.2. Name	Thomas J. Gardner
7.3. Street Address	1700 Edison Drive
7.4. City, State, Zip Code	Milford, Ohio 45150