

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 851161 (0)

1. Corporation Name

WALSH CONSTRUCTION COMPANY OF ILLINOIS

Principal Place of Business

1500 N.W. 62ND ST.
SUITE 417
FT. LAUDERDALE FL 33309
US

Mailing Address

1500 N.W. 62ND ST.
SUITE 417
FT. LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/02/1981

3a. Date of Last Report
05/01/1994

4. FEI Number
36-2231526

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

8. This corporation has liability for intangible tax under C. 100.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

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Suite, Apt. #, etc.

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City & State

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Zip

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Country

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2a. Mailing Address

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Suite, Apt. #, etc.

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City & State

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Zip

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Country

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9. Name and Address of Current Registered Agent

SLATTERY, JOHN P
1500 N.W. 62ND ST.
SUITE 417
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

WALSH, MATTHEW JR
929 W. ADAMS STREET
CHICAGO IL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

WALSH, DANIEL J
929 W. ADAM ST.
CHICAGO IL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TS

KIBBON, LARRY J
929 W. ADAMS ST.
CHICAGO IL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

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11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

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SIGNATURE:

Larry J. Kibbon
SIGNATURE AND PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4/7/95

Date

312-563-5400

System Number

411 4-27-95

0017809 CP