## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 11, 2001 8:00 am Secretary of State **DOCUMENT # 853129** CHICAGO METALLIC PRODUCTS, INC. 04-11-2001 90124 040 \*\*\*158.75 Principal Place of Business Mailing Address 111 EAST WACKER DR 800 ELA ROAD ハリリュリリレン LAKE ZURICH IL 60047 STE 2800 CHICAGO IL 60601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 36-2834591 Not Applicable Zip Zin Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent-CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П 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. CR2E034 (10/00) Addition ☐ Delete TITLE ☐ Change TITLE FEAR, GEOFFREY C. NAME NAME STREET ADDRESS STREET ADDRESS 800 ELA ROAD CITY-ST-ZIP CITY-ST-ZIP LAKE ZURICH IL 60047 SD XI Channe Addition TITLE ☐ Delete TITLE HESS, SIDNEY J., JR. NAME NAME 111 E WACKER DR STE 2800 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60601 \_\_\_Change Addition TITLE Delete -TITLE BARTON, RALPH W NAME NAME STREET ADDRESS 800 ELA ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE ZURICH IL TITLE X Delete TITLE ☐ Change X Addition SCHWARTZ, RICHARD M. NAME NAME SAXMAN, SUZANNE L. STREET ADDRESS 800 ELA ROAD STREET ADDRESS 111 E WACKER DR STE 2800 CITY-ST-ZIP LAKE ZURICH IL CITY-ST-ZIP CHICAGO IL 60601 PD TITLE ☐ Delete TITLE Change Addition FEAR, PAUL B NAME NAME STREET ADDRESS STREET ADDRESS 800 ELA ROAD CITY-ST-ZIP CITY-ST-ZIP LAKE ZURICH IL 60647 Delete ☐ Change Addition TITLE TITLE FABER, MARK R FRITZ, JAY NAME NAME

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 tike empowered.

STREET ADDRESS

CITY-ST-ZIP

800 ELA ROAD

LAKE ZURICH IL 60047

SIGNATURE:

800 ELA ROAD

LAKE ZURICH IL

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1960/ (847)438-2171 Date Daylime Phone # 227