

2001 UNIFORM BUSINESS REPORT (UBR)

5/12.

FILED
Jun 29, 2001 8:00 am
Secretary of State

05-12-2001 90023 038 ***150.00

DOCUMENT # 856649

1. Entity Name

NTW INCORPORATED OF VIRGINIA

Principal Place of Business

**3333 BEVERLY RD
 HOFFMAN ESTATES IL 60179
 US**

Mailing Address

**3333 BEVERLY RD
 768TAX. B5-2208/B
 HOFFMAN ESTATES IL 60179
 US**

2. Principal Place of Business

3. Mailing Address

3333 Beverly Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Dept. 768TAX; B2-128B

City & State

City & State

Hoffman Estates, IL

Zip

Country

Zip

60179

Country

USA

4. FEI Number

54-0926506

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

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)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITE, WILLIAM 3333 BEVERLY RD HOFFMAN ESTATES IL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CONNOR, JEFFERY 3333 BEVERLY RD HOFFMAN ESTATES IL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ODELL, MICHAEL R 3333 BEVERLY RD HOFFMAN ESTATES IL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BRADBURN, JOHN 3333 BEVERLY RD HOFFMAN ESTATES IL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BERGHEL, VICTORIA 3333 BEVERLY RD HOFFMAN ESTATES IL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ENGFRE, VICTORIA L 3333 BEVERLY RD HOFFMAN ESTATES IL 60179	<input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kathleen McJohn Secretary 3333 Beverly Rd. Hoffman Estates, IL 60179 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Richard S. Jablonski 3333 Beverly Rd. Hoffman Estates, IL 60179 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Paul Weatherford

Date

4-23-01

Daytime Phone #

CR2E034 (10/00)

Attachment
9111

Appointment and Delegation of Authority

856649

Pursuant to the authority vested in me by a resolution of the Board of Directors of Sears, Roebuck and Co., I, Jeffrey Boyer, Chief Financial Officer of Sears, Roebuck and Co., hereby appoint and designate

Clark G. Olsen
Director, Income Taxes

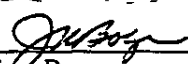
R. Paul Weatherford
Senior Manager, State Income and Franchise Taxes

of Sears, Roebuck and Co., to sign, execute and deliver on behalf of and in the name of Sears, Roebuck and Co. and its wholly-owned subsidiaries, with respect to every state of the United States, and any jurisdiction therein and the District of Columbia, any of the following instruments:

1. State Income Tax Returns, Franchise Tax Returns, and Annual Reports.
2. Pleadings, bonds, petitions, affidavits and other documents and instruments pertaining to the conduct of litigation, administrative proceedings, and/or audits including all state and local income and franchise taxes.

The authority designated pursuant to this resolution shall remain in full force and effect notwithstanding the fact that the individual who granted such authority ceases to hold the position he or she held at the time such authority was granted., whether due to promotion, transfer, resignation, retirement, death or otherwise; provided however, that such individual, his or her successor or any other individual having plenary authority under this resolution, as noted above, may modify or rescind such designated authority at any time.

IN WITNESS WHEREOF, the undersigned set his hand as Chief Financial Officer of Sears, Roebuck and Co. this 17th day of April, 2000.


Jeffrey Boyer
Chief Financial Officer