

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002912

FILED  
Mar 11, 2004  
Secretary of State

Entity Name: IOWA ILLINOIS PARTNERS, INC.

## Current Principal Place of Business:

C/O EXEC SUITES  
2600 DODGE STREET  
DUBUQUE, IA 52003

## New Principal Place of Business:

## Current Mailing Address:

C/O EXEC SUITES  
2600 DODGE STREET  
DUBUQUE, IA 52003

## New Mailing Address:

FEI Number: 42-1518224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BETTY ANN GERSKI  
15137 WILLOWOOD LANE  
BROOKSVILLE, FL 33609 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: MCCOY, JANET  
Address: 6232 N. HERMITAGE AVENUE  
City-St-Zip: CHICAGO, IL 60660

Title: P ( ) Delete  
Name: KAHLE, SALLY A  
Address: 2040 SOUTH GRANDVIEW AVENUE  
City-St-Zip: DUBUQUE, IA 52003

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALLY KAHLE

P

03/11/2004

Electronic Signature of Signing Officer or Director

Date