

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 13, 2007 8:00 am**  
**Secretary of State**

07-13-2007 90087 039 \*\*\*150.00

DOCUMENT # F06000006441

1. Entity Name  
TOM LANGE COMPANY, INC.



Principal Place of Business  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 62794-9261

Mailing Address  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 62794-9261

2. Principal Place of Business - No P.O. Box #  
755 Apple Orchard  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 19261  
Suite, Apt. #, etc.

City & State  
Springfield, IL  
Zip  
62703  
Country  
Sangamon

City & State  
Springfield, IL  
Zip  
62794-9261  
Country  
Sangamon

07052007 Chg-P CR2E034 (12/06)

4. FEI Number  
43-0961120

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
GUMPERT, F.W.  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 627949261 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
755 Apple Orchard  
Springfield, IL 62703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
GRISWOLD, JIMMY  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 627949261 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
755 Apple Orchard  
Springfield, IL 62703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DST  
SMITH, MICHAEL E  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 627949261 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Executive Vice President and Director  
755 Apple Orchard  
Springfield, IL 62703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
RUBIN, BRUCE  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 627949261 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
755 Apple Orchard  
Springfield, IL 62703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GAY, FARREL  
5231 SOUTH SIXTH STREET ROAD  
SPRINGFIELD, IL 627949261 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
755 Apple Orchard  
Springfield, IL 62703 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Secretary-Treasurer  
Hugh Seelbach  
755 Apple Orchard Rd  
Springfield, IL 62703 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Secretary/Treasurer  
Hugh Seelbach  
755 Apple Orchard  
Springfield, IL 62703 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: Hugh Seelbach Hugh Seelbach 7/9/07 217-186-3300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date De:time Phone #