FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

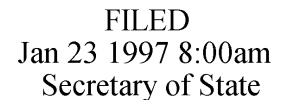
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F85196

(6)

HARRIS TRUST COMPANY OF FLORIDA





Principal Place	of Business	Mailing Add	Mailing Address				n federam unde saist diraf tibin tarie aus Ernet artift sante Best bentr betre gentr				
505 SOUTH FLAGLER DRIVE			505 SOUTH FLAGLER DRIVE WEST PALM BEACH FL 33401-5923								
WEST PALM BE	ACH FL 33401	WEST PALM	BEACH FL 3	94CFI - 5923							
							3. Date Incorporated or Qualified 06/14/1982		te of Last 9/1996		
2. Principal Pla	ace of Business	2a. Mailing	Address				4. FEI Number			Applied For	
21		26					59-2197219		1	Not Applicable	
Suite, Apt #	f, etc	Suite, A	pt #, etc.				5. Certificate of Status Desired			Additional Required	
City & State		City & S	State				6. Election Campaign Financing		\$5.0	0 May Be	
23		28					Trust Fund Contribution			d to Fees	
Zip	Country	Z _I p		Cou	ntry		8. This corporation has liability for			в. 199.032,	
24	[25]	29		30				Yes			
	9. Name and Address of Curre	ent Hegistered Ag	ent		61	Name	10. Name and Address of New Re	gistereo A	rgent		
					٠٠	Ivame					
					82	Street A	ddress (P.O. Box Number is Not Acceptal	ole)			
					83						
•					84	City			85 Zip	Code	
								FL			
office or re	o the provisions of Sections 607.05 ogistered agent, or both, in the Stat n familiar with, and accept the obli	te of Florida, Such	change was a	authorized	d by	the corp	corporation submits this statement for the portion's board of directors. I hereby acce	ourpose of of the appo	changing ointment a	its registered as registered	
SIGNATURE											
12.	Signature, typed or punited name of registered at OFFICERS A	IDD DIRECTORS	· INOI	13.	1 Age	int signature	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE SERS AND	DIBECTO	PS IN 12	
TITLE	\$		DELETE	1.110	TLF	Т	71001707070707070	2011071140	Change	***************************************	
NAME	OCHWAT, LINDA L.	•		1.2 N						_	
STREET ADDRESS	111 W. MONROE STREET			i i		ADDRESS					
CITY-ST-ZIP	CHICAGO IL			1.4 CI							
TITLE	VP		DELETE	2.1 11		1			Change	Addition	
NAME	SMITH, HALSEY			2.2 N#	ME	ŀ					
STREET ADDRESS	505 SOUTH FLAGLER DR, #	1400		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	West Palm Beach Fl			2. 4 C	ITY-S	ST-ZIP					
TITLE	T		DELETE	3.1 T)	TLE				Change	Addition	
NAME	SULKIN, MARGARET M			3.2 NA	ME	Į					
STREET ADDRESS	111 W MONROE ST			3 3 ST	REET	ADDRESS					
CITY - ST - ZIP	CHICAGO IL			3 4. C	ITY-S	ST-ZIP					
TIFLE	V		DELETE	4.1 7(TLE	Ţ	Pb	`	Change	Addition	
NAME	OPFER, GLEN R			4 2 N	AME	ļ.	Stewart, John N 505 S. Flagler De, #	\ •			
STREET ADDRESS	111 W MONROE ST			4.3 ST	REET						
CITY - ST - ZIF	CHICAGO IL			4 4 CI		T-ZIP	west Polm Beach	FL	334		
TITLE	SRVP	į	DELETE	5 1 TI					☐ Change	Addition	
NAME	ELWELL, BRUCE	* #4400		52 N/	AME						
STREET ADDRESS	505 SOUTH FLAGLER DRIVE	:, #14UU		1		ADDRESS					
CITY-ST-7IP	WEST PALM BEACH FL		DEL 575			t-ZIP			TI ACCOUNT	1 3 3 3 3 1 · ·	
TITLE	DP DATES IAV I		DELETE	61 TI			Dehairman		Change	Addition	
NAME	OWEN, JAY L			6.2 N/		- 1	over, Jay L.				
STREET ADDRESS	360 PRESTWICK CIRCLE 3	1				ADDRESS	1691 Yale Court				
CITY-ST-ZIP	PALM BEACH GARDESNS F	L		6.4 CI	TY-S	T-ZIP	LAKE FOREST, IL W	<u> 240x</u>			

I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.