

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92000000422 (7)

1. Corporation Name

ARLP, INC.



Principal Place of Business

900 NORTH MICHIGAN AVENUE
CHICAGO IL 60611

Mailing Address

900 NORTH MICHIGAN AVENUE
CHICAGO IL 60611

3. Date Incorporated or Qualified

11/30/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when appointing

Date:

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
MOTTA, JAMES D.
7900 GLADES ROAD
BOCA RATON FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SAVP
YATES, KEVIN B
900 NORTH MICHIGAN
CHICAGO IL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
LOVELETTE, STEVEN A
900 NORTH MICHIGAN
CHICAGO IL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DVP
NICKELE, GARY
900 NORTH MICHIGAN
CHICAGO IL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
KOGEN, HOWARD
900 N. MICHIGAN AVENUE
CHICAGO IL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

P
Lassman, Mark
7900 Glades Road
Boca Raton, FL 33434

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

D/V
Nickele, Gary
900 N. Michigan Ave.
Chicago, IL 60611

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

V
Kogen, Howard
900 N. Michigan Ave.
Chicago, IL 60611

☒ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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, or changed, or on an Attachment with address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin B. Yates, Secretary

Date:

312-915-1936

Daytime Phone #

CR2E034 (12/95)