

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 26, 2002 8:00 am
Secretary of State

08-26-2002 90063 036 ***550.00

DOCUMENT # F93000000652

1. Entity Name
SCHUMACHER ELECTRIC CORPORATION

Principal Place of Business
**801 BUSINESS CENTER DR
 MOUNT PROSPECT IL 60056
 US**

Mailing Address
**801 BUSINESS CENTER DR
 MOUNT PROSPECT IL 60056
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **36-2093003**

Applied For
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMAS R SAWYER
 2081 E OCEAN BLVD.
 2ND FLOOR
 STUART FL 34996**

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

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DCPS
 SCHUMACHER, DONALD A
 408 N. DEE RD.
 PARK RIDGE IL 60068** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PRESIDENT / CEO
 DONALD SCHUMACHER
 2407 CHERRY ST.
 PARK RIDGE, IL 60068** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DT
 CERNOHOUS, RALPH
 8638 DORY LANE
 WILLOW SPRINGS IL 60480** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V.P. OF FINANCE / CFO
 DANIEL J. FRANO
 4429 N NEDDAH AVE.
 HARWOOD-HEIMES, IL 60706** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DVP
 STEPHENS, BILL J
 1055 WEDGEWOOD DR.
 ELGIN IL 60123** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**EXEC. V.P.
 JOHN WALDRON
 40 W. 076 STURBRIDGE WAY
 ELGIN, IL 60123** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ 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

Date

Daytime Phone #

CR2E034 (4/02)