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FILED

Apr 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F93000000834 (2)

1. Corporation Name  
DFC TRANSPORTATION COMPANY

Principal Place of Business

12007 SMITH DR.  
HUNTLEY IL 60142

Mailing Address

12007 SMITH DR.  
HUNTLEY IL 60142-9604



3. Date Incorporated or Qualified

02/17/1993

3a. Date of Last Report

03/11/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

4. FEI Number

36-2947235

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 of agent or person authorized to register agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME DEAN, HOWARD M  
STREET ADDRESS 3800 N. RIVER RD.  
CITY-ST-ZIP FRANKLIN PARK IL 60131

DELETE

TITLE D  
NAME ROSE, THOMAS L  
STREET ADDRESS 3800 N. RIVER RD  
CITY-ST-ZIP FRANKLIN PARK IL

DELETE

TITLE D  
NAME RAVENCROFT, THOMAS A  
STREET ADDRESS 3800 N. RIVER RD.  
CITY-ST-ZIP FRANKLIN PARK IL 60131

DELETE

TITLE P  
NAME THOMPSON, HARVEY K  
STREET ADDRESS 12007 SMITH DR.  
CITY-ST-ZIP HUNTLEY IL 60142

DELETE

TITLE VP  
NAME WOOLRIDGE, CECIL  
STREET ADDRESS 12007 SMITH DR.  
CITY-ST-ZIP HUNTLEY IL 60142

DELETE

TITLE T  
NAME HECOX, DALE  
STREET ADDRESS 3800 N RIVER RD  
CITY-ST-ZIP FRANKLIN PARK FL 60131

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

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

Change Addition

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

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 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.

SIGNATURE:

Signature of officer or director: *Donald P. Miller* BELAND MILLER ACCOUNTING 4-7-97 (847) 669-3066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)