

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

**FILED**

**Apr 23 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F93000001459 (7)**

1. Corporation Name  
**STS PARTNER CORPORATION**



Principal Place of Business <b>3333 BEVERLY RD D/768TAX B5-266A HOFFMAN ESTATES IL 60719 US</b>	Mailing Address <b>3333 BEVERLY RD D/768TAX - B5-266A HOFFMAN ESTATES IL 60182-3322 US</b>
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3. Date Incorporated or Qualified <b>03/24/1993</b>	3a. Date of Last Report <b>04/10/1996</b>
4. FEI Number <b>36-3817598</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 60179	29 60179
25	30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>DAVIS, RUSSELL S</b>
STREET ADDRESS	<b>3333 BEVERLY RD</b>
CITY-ST-ZIP	<b>HOFFMAN ESTATES IL</b>
TITLE	<b>V</b> <input type="checkbox"/> DELETE
NAME	<b>LACY, ALAN J</b>
STREET ADDRESS	<b>3333 BEVERLY RD</b>
CITY-ST-ZIP	<b>HOFFMAN ESTATES IL</b>
TITLE	<b>T</b> <input type="checkbox"/> DELETE
NAME	<b>SMIALOWSKI, JOSEPH A</b>
STREET ADDRESS	<b>3333 BEVERLY RD</b>
CITY-ST-ZIP	<b>HOFFMAN ESTATES IL</b>
TITLE	<b>S</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>GRIENENBERGER, WARREN F</b>
STREET ADDRESS	<b>1310 CHESTNUT AVE.</b>
CITY-ST-ZIP	<b>WILMETTE IL 60091</b>
TITLE	<b>T</b> <input type="checkbox"/> DELETE
NAME	<b>CONSTANTINE, JAMES</b>
STREET ADDRESS	<b>3333 BEVERLY RD</b>
CITY-ST-ZIP	<b>HOFFMAN ESTATES IL</b>
TITLE	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>President and Director</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Alan J. Lacy</b>
1.3 STREET ADDRESS	<b>3333 Beverly Rd.</b>
1.4 CITY-ST-ZIP	<b>Hoffman Estates, IL 60179</b>
2.1 TITLE	<b>Vice President and Director</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>Joseph A. Smialowski</b>
2.3 STREET ADDRESS	<b>3333 Beverly Rd.</b>
2.4 CITY-ST-ZIP	<b>Hoffman Estates, IL 60179</b>
3.1 TITLE	<b>Secretary</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>Robert Pence</b>
3.3 STREET ADDRESS	<b>3333 Beverly Rd.</b>
3.4 CITY-ST-ZIP	<b>Hoffman Estates, IL 60179</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<b>Director</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	<b>Gary Crittenden</b>
6.3 STREET ADDRESS	<b>3333 Beverly Rd.</b>
6.4 CITY-ST-ZIP	<b>Hoffman Estates, IL 60179</b>

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:  4/14/97 847-286-9028  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**STS Partner Corporation  
Officers and Directors  
December 31, 1996**

**OFFICERS**

Alan J. Lacy	President
Joseph A. Smialowski	Vice President
James D. Constantine	Treasurer
Robert Pence	Secretary

**Address**

3333 Beverly Rd.	Hoffman Estates, IL	60179
3333 Beverly Rd.	Hoffman Estates, IL	60179
3333 Beverly Rd.	Hoffman Estates, IL	60179
3333 Beverly Rd.	Hoffman Estates, IL	60179

**DIRECTORS**

Gary Crittenden  
Alan J. Lacy  
Joseph A. Smialowski

3333 Beverly Rd.	Hoffman Estates, IL	60179
3333 Beverly Rd.	Hoffman Estates, IL	60179
3333 Beverly Rd.	Hoffman Estates, IL	60179

**STS PARTNER CORPORATION**

Pursuant to the authority vested in me by the By-Laws of STS Partner Corporation (STS Partner), I, Alan J. Lacy, Vice-President, hereby appoint and designate the following Sears, Roebuck and Co. Tax Department personnel:

James A. Blanda  
Vice President and Controller, Finance

Carol W. Garnant  
Senior Director, Taxes

Susan Penway  
Senior Tax Manager, State Income

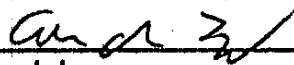
to sign, execute and deliver on behalf of and in the name of STS Partner with respect to every state of the United States, and any jurisdiction therein and the District of Columbia, any of the following instruments:

1. State Income Tax Returns, Franchise Tax Returns, and Annual Reports.
2. Pleadings, bonds, petitions, affidavits and other documents and instruments pertaining to the conduct of litigation, administrative proceedings, and/or audits including income and franchise taxes.

All previous Delegations of Authority relating to the same subject matter to the within-named persons are hereby revoked and superseded.

This Delegation of Authority shall become effective upon the date hereof and shall continue in effect thereafter so long as the within-named persons remain in the above-designated position or until revoked by me or the current Vice President of STS Partner. The termination of this Delegation of Authority shall not invalidate any of the above-mentioned instruments which may have been executed and delivered during the effective term hereof.

IN WITNESS WHEREOF, the undersigned has set his hand as Vice-President of STS Partner Corporation this 23<sup>rd</sup> day of February, 1996.

  
Alan J. Lacy  
Vice-President  
STS Partner Corporation

ATTEST:

  
James Constantine  
Treasurer