2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3333 BEVERLY ROAD

D/768TAX.B5-220B/B

F9300001459 **DOCUMENT #**

1. Entity Name

Principal Place of Business

3333 BEVERLY RD

D/768TAX B5-266A

STS PARTNER CORPORATION



FILED May 06, 2003 8:00 am § Secretary of State

05-06-2003 90055 018 ***150.00



HOFFMAN ESTATES IL 60719		HOFFMAN ESTATES IL 60179					1101 (10) (11)
US		US					
2. Principal Place of Business 3333 Bevenly Rd. 3. Mailing Address 3333 Bevenly		My Rd					
Suite, Apt. り/7687	A4, Ba-130B	Suite, Apt. #, etc.	B2-138		CHECK HERE IF	MAKING CHANGES	
City & Stat	nan Estates, 1-	City & State Hoffman Es	tates, 1	٤. ا	FEI Number 36-3817598	}+-`	pplied For ot Applicable
Zip 01	79 Country USA	Zip 60179	Country USA	5.	Certificate of Status Desired	S8.75 Ad Fee Require	
	6. Name and Address of Current F	legistered Agent	+	7. Name and Address of New Registered Agent			
0 - 00-0			Name	Name			
	ORATION SYSTEM		Street A	Street Address (P.O. Box Number is Not Acceptable)			
1200 SQU	TH PINE ISLAND ROAD			over the second of the second			
PLANTATIO	ON FL 33324)				j
			City	City FL Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office of	r registered ag	ent, or both, in the State of Florid	da. I am familiar with,	and accept
the obligat	tions of registered agent.						[
SIGNATURE							}
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: F	Registered Agent signat	ure required when re	einstating)	DATE	
	ILE NOW!!! FEE IS \$150.00				<u> </u>	 	
	r May 1, 2003 Fee will be \$550.00				9. Election Campaign Final		00 May Be
	k Payable to Florida Department of	State			Trust Fund Contribution.	니 Added	d to Fees
10.	OFFICERS AND D	DIRECTORS	11.	AD	L DITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 11
TITLE	PD	☐ Delete	TITLE	PD		Change	Addition
NAME	LACY, ALAN J.	L Belete	NAME	Glenn	R. Richten		
STREET ADDRESS	3333 BEVERLY RD.		STREET ADDRESS	33336	seveny load		J.
CiTY-ST-ZiP	HOFFMAN, ESTATES IL		CITY-ST-ZIP	Hoffin	an Estates, 14	60179	
TITLE	AS	☐ Delete	TITLE	5		Change	Addition
NAME	BUKOLT, REBECCA		NAME	April	Hanes-Bound bevenly Road		[]
STREET ADDRESS	3333 BEVERLY RD.		STREET ADDRESS	3333 C	bevenly road	: 1	
CITY-ST-ZIP	HOFFMAN ESTATES IL 60179		CITY-ST-ZIP	HOFFIN	rin Estates, 1L	66179	<u>4]</u>
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME			NAME				ļ
STREET ADDRESS	<i>;</i> :		STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>			
TIFLE		☐ Delete	TITLE]		☐ Change	☐ Addition
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CITY-ST-ZIP		_ 	CITY-ST-ZIP	ļ			
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STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
	 			 		F1 0bass	T Addition
TITLE Name		☐ Delete	TITLE NAME			Change	Addition
STREET ADDRESS	1		STREET ADDRESS	1			
CITY-ST-ZIP			CITY-ST-ZIP				
	pertify that the information supplied with t	his filing does not qualify for th		L	119 07(3)(i) Florida Statutea Lt.	irther certify that the i	nformation
12. 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 10 or Block 11 if changed, or on an attachmant with an address, with all other like empowered.

SIGNATURE: ______

Daytime Phone #

4TTACHMENT 80114933 F93000001459

STS PARTNER CORPORATION OFFICERS AND BOARD OF DIRECTORS

Directors	Address			
Glenn R. Richter	3333 Reverly Rd. Hoffman Estates II. 60179			

Officers	Title	Address
Glenn R. Richter	President	3333 Beverly Rd. Hoffman Estates, IL 60179
April Hanes-Dowd	Secretary	3333 Beverly Rd. Hoffman Estates, IL 60179