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 # F94000001486

1. Corporation Name
The Auto Conduit Corporation

Principal Place of Business | Mailing Address

2. Principal Place of Business
123 North Wacker Dr., 26th Floor
Chicago, Illinois 60606

2a. Mailing Address
123 North Wacker Dr., 26th Floor
Chicago, Illinois 60606

3. Date Incorporated or Qualified: 3/23/94

3a. Date of Last Report:

4. FEI Number: 36-3852675 — 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
CT 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 _____

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	Gilbert N. Zitin	
STREET ADDRESS	123 N. Wacker Dr.	
CITY-ST-ZIP	Chicago IL 60606	
TITLE	AT	☐ DELETE
NAME	Charles Nelson	
STREET ADDRESS	123 N. Wacker Dr.	
CITY-ST-ZIP	Chicago, IL 60606	
TITLE	VT	☐ DELETE
NAME	Burton Lubow	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VS	☐ DELETE
NAME	William J. Sparer	
STREET ADDRESS	123 N. Wacker Dr.	
CITY-ST-ZIP	Chicago IL 60606	
TITLE	ED	☐ DELETE
NAME	Zarin Mehta	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AVP T	☐ DELETE
NAME	Paul J. Rabin	
STREET ADDRESS	123 N. Wacker Dr.	
CITY-ST-ZIP	Chicago IL 60606	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	123 N. Wacker Dr.	
1.4 CITY-ST-ZIP	Chicago, Illinois 60606	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	123 N. Wacker Dr	
3.4 CITY-ST-ZIP	Chicago, Illinois 60606	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☒ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	123 N. Wacker Dr	
5.4 CITY-ST-ZIP	Chicago IL 60606	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ Paul J. Rabin 4/29/96 312-701-3478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)