


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

FILED

Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000003213 (5) 1. Corporation Name FLORIDA WAREHOUSE MANAGEMENT SERVICES, INC.					
Principal Place of Business 23 PUBLIC SQUARE, STE. 440 BELLEVILLE IL 62220			Mailing Address 23 PUBLIC SQUARE, STE. 440 BELLEVILLE IL 62220		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/20/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 37-1206365	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. 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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARTMANN, JURGEN K		1.2 NAME		
STREET ADDRESS	PO BOX 8 N/A		1.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD IL 62048		1.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PABST, KIP		2.2 NAME		
STREET ADDRESS	PO BOX 8 N/A		2.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD IL 62048		2.4 CITY-ST-ZIP		
TITLE	DP	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOFF, DAVID		3.2 NAME		
STREET ADDRESS	PO BOX 67 N/A		3.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD IL 62048		3.4 CITY-ST-ZIP		
TITLE	DOCO	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MEYER, DENNIS		4.2 NAME		
STREET ADDRESS	900 ENGINEERS RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	GRANITE CITY IL		4.4 CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FLYNN, PATRICK M		5.2 NAME		
STREET ADDRESS	23 PUBLIC SQ., STE. 440		5.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEVILLE IL 62220		5.4 CITY-ST-ZIP		
TITLE	C	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASSIDAY, WILLIAM		6.2 NAME		
STREET ADDRESS	PO BOX 67 N/A		6.3 STREET ADDRESS		
CITY-ST-ZIP	HARTFORD IL 62048		6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

SIGNATURE: Patrick M. Flynn

Patrick M. Flynn
Secretary

1/16/98

618-233-0480

CR2E094 (10/97)

FLYNN & GUYMON
ATTORNEYS

23 PUBLIC SQUARE, SUITE 440
BELLEVILLE, ILLINOIS 62220

PATRICK M. FLYNN
DAVID E. GUYMON
CARLA J. EHLERS

618-233-0480
FAX 618-233-0601

HAROLD BALTZ (1904-1970)
OTIS E. GUYMON (1908-1971)

January 16, 1998

Florida Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

In re: Florida Warehouse Management Services, Inc.

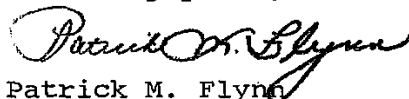
Dear Sir:

I enclose herewith the 1998 Annual Report for the above corporation.

Also enclosed is our firm check payable to the Florida Department of State in the amount of \$150.00 representing filing fee.

Thank you.

Sincerely yours,


Patrick M. Flynn

PMF:ek
Enc.