

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **F94000004500 (4)**

1. Corporation Name
CKH, INC.

FILED
Aug 05 1998 8:00am
Secretary of State



Principal Place of Business
**31 W. 007 NORTH AVE.
SUITE 200
W. CHICAGO IL 60185**

Mailing Address
**31 W. 007 NORTH AVE.
SUITE 200
W. CHICAGO IL 60185**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **2020 DEAN ST.**

Suite, Apt. #, etc.

22 **UNIT D-1**

City & State

23 **ST. CHARLES, IL**

Zip

24 **60174**

Country

25 **USA**

2a. Mailing Address

26 **2020 DEAN ST.**

Suite, Apt. #, etc.

27 **UNIT D-1**

City & State

28 **ST. CHARLES, IL**

Zip

29 **60174**

Country

30 **USA**

3. Date Incorporated or Qualified

08/30/1994

4. FEI Number

36-3972150

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**CORPAMERICA, INC.
1525 S. ANDREWS AVE., SUITE 218
FT. LAUDERDALE FL 33316**

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

TITLE **DP** ☐ DELETE

NAME **WINNER, JAMES E JR.**

STREET ADDRESS **32 W. STATE ST.**

CITY-ST-ZIP **SHARON PA 16146**

TITLE **DV** ☐ DELETE

NAME **DUBOSE, PIERRE W III**

STREET ADDRESS **31 W 007 NORTH AVE., STE. 200**

CITY-ST-ZIP **W. CHICAGO IL 60185**

TITLE **D** ☐ DELETE

NAME **DUNCAN, MARK**

STREET ADDRESS **31 W 007 NORTH AVE., STE. 200**

CITY-ST-ZIP **W. CHICAGO IL 60185**

TITLE **DS** ☐ DELETE

NAME **HORNBOSTEL, JOHN F JR.**

STREET ADDRESS **32 W. STATE ST.**

CITY-ST-ZIP **SHARON PA 16146**

TITLE **DT** ☒ DELETE

NAME **MCCANDLESS, JEFFREY A**

STREET ADDRESS **32 W. STATE ST.**

CITY-ST-ZIP **SHARON PA 16146**

TITLE **V** ☒ DELETE

NAME **VRANEK, KENNETH JR.**

STREET ADDRESS **31 W 007 NORTH AVE., STE. 200**

CITY-ST-ZIP **CHICAGO IL 60185**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**2020 DEAN ST, UNIT D-1
ST. CHARLES, IL 60174**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**2020 DEAN ST, UNIT D-1
ST. CHARLES, IL 60174**

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

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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

Mark Duncan

Mark Duncan

7/28/98

630-581-6760

CR2E034 (5/98)