

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY -1 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000005529 (2)

1. Corporation Name

LANGE TRADING COMPANY, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/25/1994	
4. FEI Number	Applied For
86-0696909	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

2. Principal Place of Business	2a. Mailing Address
P.O. BOX 19261 SPRINGFIELD IL 62794-9261	P.O. BOX 19261 SPRINGFIELD IL 62794-9261
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

MEUERS, LAWRENCE H
2590 GOLDEN GATE PARKWAY
SUITE 109
NAPLES FL 33942

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1. TITLE	Chairman of Board ☒ Change ☐ Addition
NAME	GAY, FARRELL C	2. NAME	
STREET ADDRESS	1516 WESTLAKE SHORE DRIVE	3. STREET ADDRESS	
CITY, ST, ZIP	SPRINGFIELD IL 62707	4. CITY, ST, ZIP	
TITLE	V	5. TITLE	DIRECTOR ☒ Change ☐ Addition
NAME	LANGE, TOM C	6. NAME	
STREET ADDRESS	6527 THOMAS JEFFERSON COURT	7. STREET ADDRESS	
CITY, ST, ZIP	NAPLES FL 33963	8. CITY, ST, ZIP	
TITLE	S	9. TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	GUMP, FILMORE W	10. NAME	
STREET ADDRESS	444 TRILBY COURT	11. STREET ADDRESS	
CITY, ST, ZIP	NOBLESVILLE IN 46060	12. CITY, ST, ZIP	
TITLE	TAS	13. TITLE	Secretary - TREASURE ☒ Change ☐ Addition
NAME	SMITH, MICHAEL E	14. NAME	
STREET ADDRESS	2120 SOUTH GLENWOOD	15. STREET ADDRESS	
CITY, ST, ZIP	SPRINGFIELD IL 62707	16. CITY, ST, ZIP	
TITLE		17. TITLE	
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	
TITLE		21. TITLE	
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY, ST, ZIP		24. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.01(2)(g), 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. I am available for or director of the corporation or the person or persons empowered to execute this report as required by Chapter 190, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report or as an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael E. Smith, Sec. Treas

5/1/95