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PROFIT CORPORATION ANNUAL REPORT



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

1996

appears in Block 12 or B

SIGNATURE:

F9400005529 (2) **DOCUMENT #**

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LANGE TR	ADING COMPA	NY. INC.	

Principal Place of Business Mailing Address P.O. BOX 19261 P.O. BOX 19261 SPRINGFIELD IL 62794-9261 SPRINGFIELD IL 62794-9261 3. Date Incorporated or Qualified 3a. Date of Last Report 10/25/1994 05/01/1995 2a. Mailing Address 4. F£l Number Applied For 2. Principal Place of Business 86-0696909 21 Not Applicable 26 Suite, Apt. #. etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 Trust Fund Contribution Added to Fees 28 Zφ Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No Florida Statutes 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MEUERS, LAWRENCE H 82 Street Address (P.O. Box Number is Not Acceptable) 2590 GOLDEN GATE PARKWAY 83 SUITE 109 NAPLES FL 33942 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. Thereby accept the appointment as registered agent. Laur familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typind or printed name of registered agent and strest at outside (NOTE: Registeros Aprint Signaturi, resp. (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Change ■ Addition 1.13000 TITLE GAY, FARRELL C CR2E034 1.2 NAME NAME 1516 WESTLAKE SHORE DRIVE STREET ADDRESS 1.3 STREET ADDRESS SPRINGFIELD IL 14 011Y - ST-7 P CITY-ST-ZIP Addition DELETE ☐ Change 2 1 TITLE TITLE LANGE, TOM C NAME 6527 THOMAS JEFFERSON COURT 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL 2.4 CITY - ST. ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3 1111.6 **GUMPERT, FILMORE W** 3.2 NAME NAME 444 TRILBEY COURT 3.3 STREET ADDRESS STREET ADDRESS NOBLESVILLE IN 3.4 CITY - ST - ZIP CITY-ST-ZIP DELFTE Change Addition | 4. 1 THE E TITLE SMITH, MICHAEL E 42 NAME NAME 2120 SOUTH GLENWOOD 4.3 STREET ADDRESS STREET ADDRESS SPRINGFIELD IL 4.4.0(TY-ST-ZIF CITY-ST-ZIP ☐ DELETE Change Add tion 5 1 11111 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City ST-ZIP CITY-ST-ZIP DELETE Change ■ Add-bon 6 1 THE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ACCIRESS CITY - ST-ZIP 14. If do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(s). Florida Statutes. I further certify that the information indicated on this armual 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 an altachment with an address

ME OF SIGNING OFFICER OR DIRECTOR

Caybrine Phone 4