

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000005582

1. Corporation Name
MHC SYSTEMS, INC.

Principal Place of Business

C/O ANN M. SCHNEIDER
2 N. RIVERSIDE PLAZA
CHICAGO IL 60606

Mailing Address

C/O ANN M. SCHNEIDER
2 N. RIVERSIDE PLAZA
CHICAGO IL 60606

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90021 013 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1994

4. FEI Number

36-3983600

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 the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
S	SCHNEIDER, ANN M	2 N. RIVERSIDE PLAZA	CHICAGO IL	<input type="checkbox"/>
DVPT	HENEGHAN, THOMAS P. JR.	2 N. RIVERSIDE PLAZA	CHICAGO IL	<input type="checkbox"/>
DC	ZELL, SAMUEL	2 N. RIVERSIDE PLAZA	CHICAGO IL 60606	<input type="checkbox"/>
PD	HELFAND, DAVID	2 N. RIVERSIDE PLAZA	CHICAGO IL 60606	<input checked="" type="checkbox"/>
SASD	KELLEHER, ELLEN	2 N. RIVERSIDE PLAZA	CHICAGO IL 60606	<input type="checkbox"/>
AS	OBUCHOSWKI, SUSAN	2 N. RIVERSIDE PLAZA	CHICAGO IL	<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D/EVP/T				<input checked="" type="checkbox"/>	<input type="checkbox"/>
P/D	Walker, Howard	2 N. Riverside Plaza	Chicago, IL 60606	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D/EVP/AS				<input checked="" type="checkbox"/>	<input type="checkbox"/>

SIGNATURE:

SIGNATURE REQUIRED

3/25/99

312-466-3607

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)