

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91028 002 ***150.00

DOCUMENT # F94000006466
 1. Entity Name
BENEFICIAL SYSTEMS DEVELOPMENT CORPORATION



Principal Place of Business Mailing Address
2700 SANDERS RD **2700 SANDERS RD**
PROSPECT HEIGHTS, IL 60070 **PROSPECT HEIGHTS, IL 60070**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



04212004 Chg-P CR2E034 (10/03)
 4. FEI Number Applied For
51-0362887 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	DETELICH, TM	2700 SANDERS RD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>
VPD	DELUCA, M.A.	2700 SANDERS ROAD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>
D	VOZAR, J.A.	2700 SANDERS ROAD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>
S	BROMLEY, NJ	2700 SANDERS RD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>
T	MOSS, B.B. JR.	2700 SANDERS ROAD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>
AS	ANGELO, J.M.	2700 SANDERS ROAD	PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
	Polayes, F.M			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D E V P C F D			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	V P S			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	V P T			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph M. Angelo* **Joseph M. Angelo** 4/26/04 847.564.5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

03475 990197