

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 # F97000001494 (0)  
1. Corporation Name

DAVID TROUT & ASSOCIATES, LTD. CORPORATION

Principal Place of Business

3233 N. ARLINGTON HEIGHTS RD. SUITE 208  
ARLINGTON HEIGHTS IL 60004

Mailing Address

3233 N. ARLINGTON HEIGHTS RD. SUITE 208  
ARLINGTON HEIGHTS IL 60004

FILED  
Oct 14 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number

36-3892548

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

STONE, RICHARD J  
% HOWARD, BRAWNER & STONE  
2950 SW 27TH AVE, SUITE 210  
MIAMI FL 33133

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-STATE-ZIP	DELETE
CP	SILVER, BONNIE	4226 N. RIDGE	ARLINGTON HEIGHTS IL 60004	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-STATE-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-STATE-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-STATE-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-STATE-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-STATE-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-STATE-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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-10/14/98--01071--026  
\*\*\*150.00

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:

*Bonnie Silver*

7/7/98 8m-818-0048

CR2E034 (5/98)

TROUT & ASSOCIATES, LTD.

3233 N. Arlington Heights Road  
Arlington Heights, Illinois 60004

②

David W. Trout  
Bonnie A. Sadur  
Jay M. Silver  
Laurie A. Donzelli  
Candace D. Oshel

(847) 818-8848

(800) 818-8848

Fax: (847) 818-8778

Internet Address: collect@troutltd.com

Web Site: <http://www.webdebt.com>

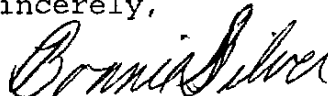
Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

September 22, 1998

To Whom It May Concern,

Attached is my notice and a check for renewal for \$150. I was in contact with your office and explained that I had never received a first notice. I was instructed to send this letter with the enclosed check. Please notify me if anything else is needed.

Sincerely,



Bonnie Silver