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May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **J71557** **(9)**

1. Corporation Name
LAKE UTILITY SERVICES, INC.

Principal Place of Business
2335 SANDERS ROAD
NORTHBROOK IL 60062-6108

Mailing Address
2335 SANDERS ROAD
NORTHBROOK IL 60062-6108

3. Date Incorporated or Qualified: **05/05/1987**
3a. Date of Last Report: **04/23/1996**

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: **36-3705514** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 _____ DATE
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☒ DELETE	1.1 TITLE	Chairman & CEO ☐ Change ☒ Addition
NAME	OWENS, PERRY B.	1.2 NAME	James L. Camaren
STREET ADDRESS	2335 SANDERS ROAD	1.3 STREET ADDRESS	2335 Sanders Road
CITY-ST-ZIP	NORTHBROOK IL	1.4 CITY-ST-ZIP	Northbrook, IL 60062
TITLE	VS ☐ DELETE	2.1 TITLE	President ☐ Change ☒ Addition
NAME	DEMAREE, DAVID	2.2 NAME	Lawrence N. Schumacher
STREET ADDRESS	2335 SANDERS ROAD	2.3 STREET ADDRESS	2335 Sanders Road
CITY-ST-ZIP	NORTHBROOK IL	2.4 CITY-ST-ZIP	Northbrook, IL 60062
TITLE	TDV ☒ DELETE	3.1 TITLE	Vice President ☐ Change ☒ Addition
NAME	O'BRIEN, PATRICK J.	3.2 NAME	Carl J. Wenz
STREET ADDRESS	2335 SANDERS ROAD	3.3 STREET ADDRESS	2335 Sanders Road
CITY-ST-ZIP	NORTHBROOK IL	3.4 CITY-ST-ZIP	Northbrook, IL 60062
TITLE	☐ DELETE	4.1 TITLE	Vice President ☐ Change ☒ Addition
NAME		4.2 NAME	Andrew N. Dopuch
STREET ADDRESS		4.3 STREET ADDRESS	2335 Sanders Road
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Northbrook, IL 60062
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: [signature] 2/14/97 847-498 6440
SIGNATURE AND TYPE OR PRINT THE NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Lawrence N. Schumacher - President

CR2E034 (9/96)