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Mar 10 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 # K13205 (5)

1. Corporation Name
GJK, INCORPORATED



Principal Place of Business
1520 KENSINGTON ROAD, SUITE 201
OAK BROOK IL 60521

Mailing Address
1520 KENSINGTON ROAD, SUITE 201
OAK BROOK IL 60521-2141

3. Date Incorporated or Qualified 01/28/1988
3a. Date of Last Report 07/15/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

36-3624673

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEBER, DAVID M.
C/O ABERCROMBIE & KENT
9301 N AIA S1
VERO BEACH 32963

81 Name

Caroline Wheeler

82 Street Address (P.O. Box Number is Not Acceptable)

C/O Abercrombie & Kent

83

9301 North AIA

84 City

Vero Beach

FL

85 Zip Code

32963

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

Caroline Wheeler

(NOTE: Registered Agent signature required when reinstating)

3/3/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CPD
NAME KENT, GEOFFREY J. W.
STREET ADDRESS 9301 N AIA S1
CITY, ST, ZIP VERO BEACH FL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE TD
NAME KENT, JORIE BUTLER
STREET ADDRESS 9301 N AIA S1
CITY, ST, ZIP VERO BEACH FL ☐ DELETE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE VSD
NAME WEBER, DAVID M.
STREET ADDRESS 1520 KENSINGTON RD. #201
CITY, ST, ZIP OAK BROOK IL ☒ DELETE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP ☐ DELETE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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: *Caroline Wheeler*

SIGNATURE TO BE PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/97

Date

(630) 357-7816

Daytime Phone #

CR2E034 (9/96)