

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001155

1. Entity Name

AMERICAN DELIVERY SERVICE, LLC

Principal Place of Business

535 WEST CHICAGO AVE  
CHICAGO IL 60671

Mailing Address

535 WEST CHICAGO AVE  
CHICAGO IL 60671

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 AUG 16 AM 10:02



DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4806445  
APPLIED FOR

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

10000336881-3

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

-08/23/00-01092-006  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME ☐ Delete  
MGRM  
MONTGOMERYB WARD, LLC  
STREET ADDRESS 535 WEST CHICAGO AVE  
CITY-ST-ZIP CHICAGO IL 60671

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☒ Addition  
Mgr.  
Charles H. Dorger, Jr.  
STREET ADDRESS 200 S. Frontage Rd., Suite 330  
CITY-ST-ZIP Burr Ridge, IL 60521

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition  
Mgr.  
Don Civgin  
STREET ADDRESS 535 West Chicago Ave.  
CITY-ST-ZIP Chicago, IL 60671

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition  
Mgr.  
Philip D. Delk  
STREET ADDRESS 535 West Chicago Ave.  
CITY-ST-ZIP Chicago, IL 60671

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition  
Mgr.  
Kenneth P. Hansen  
STREET ADDRESS 535 West Chicago Ave.  
CITY-ST-ZIP Chicago, IL 60671

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition  
Mgr.  
G. Tad Morgan  
STREET ADDRESS 535 West Chicago Ave  
CITY-ST-ZIP Chicago, IL 60671

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

08/02/2000 (312) 467 4914

Date

Daytime Phone #

CR2E083 (5/00)