FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT QF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N96000004055 (7)

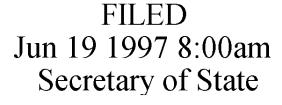
CHECKERS ADVERTISING COOPERATIVE ASSOCIATION OF CHICAGO, INC.

Principal Place of Business

Mailing Address

600 CLEVELAND STREET

600 CLEVELAND STREET





8TH FLOOR	FI SARIE			8TH FLOOR CLEARWATER FL 34615-4151									
CLEARWATER FL 34615			VUERNIAL	OCCUMENTED TO OPPOSE 191					3. Date Incorporated or Qualified 3a. Date of Last Report 08/02/1996				
2. Principal Pl	lace of Busin	2a. Mailing	2a. Mailing Address				4. FEI Num		1	Ap	plied For		
21		26	26					APPLIED			Applicable		
I Suite Ant.	#, etc.	Suite, A	Suite, Apt. #, etc.				E Cortificat	e of Status Desired	☐ \$1		dditional		
22		27					5. Certificat	e of Status Desired	<u> </u>	Fee Re	quired		
I City & State	9	— ´	City & State				6. Election (Campaign Financing	\$	5.00	May Be		
23			28				<u> </u>	Trust Fun	d Contribution		Added to	Fees	
Zip	}	Country	Zip		\vdash	untry	,		oration has liability for i			199.032,	
24		25	29		30			Florida S		Yes X No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent Name					
4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -							INAITIE						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD						82	Street	Address (P.O. Box N	umber is Not Acceptab	le)		***************************************	
, PLANIA	MON FL 33	3324											
, F						84	City			FL 85	Zip C	ode	
11. Pursuant t													
office or re	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.												
SIGNATURE	SIGNATURE												
Signature, typed or printed name of registered agent and tritle if applicable. (NOTE: Ro 12. OFFICERS AND DIRECTORS							nt signature	required when reinstating)	S/CHANGES TO OFFIC	DATE	FOTOR	2 151 4 2	
TITLE T	D	OFFICENS A		XI DELETE	13.	TITLE		P/COO/D	5/CHANGES TO OFFIC		Change	Addition	
NAME	_	O, ALBERT J	'	A OLICIL		NAME			I/ HAM N E		VIIBIIVO	KZ Vocition	
STREET ADDRESS	3TH FLOOR				ADDRESS	FORTMAN, RICHARD E. 600 CLEVELAND STREET, 8TH PLO		20					
CITY-ST-ZIP		VATER FL 34615	, iii i Eoon						R, Fr 346		<i>-</i> /-C	į į	
TITLE	D	MILNIL OTOIS		DELETE	_	CITY-S TITLE	1-ZIP	SR VP/SON	COULS IN		Change	Addition	
NAME		R, JAMES T		O LUC / L		NAME		0.00000	0000,070	¥ZJ (onange		
STREET ADDRESS		VELAND STREET, (TH FLOOR	FLOOR		2.3 STREET ADDRESS							
CITY-ST-ZIP		ATER FL 34615	, iii i Look	TILOUN			T-ZIP	!					
TITLE	D	INIER LE OTOTO		X DELETË		IITLE	ol-Zir	EXUP/CFO	7/b	П	Change	Addition	
NAME	WEI CH.	MICHAEL T	·	-		NAME					o nango		
STREET ADDRESS		VELAND STREET, 8	TH FLOOR	FLOOR			ADDRESS	600 CUEV	STEIN, JOSEPH N.				
CITY-ST-ZIP		ATER FL 34615	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				ST-ZIP	CLEARWATER, FL 34615					
TITLE	y popularity			DELETE		TITLE) (- <u>Z</u> I)	TID	ionej i e i		Change	X Addition	
NAME			·			NAME		BECK, WEIV.	OYA.				
STREET ADDRESS					1		ADDRESS	600 CLEVE	CHIVID STREE	F; 8711	F200	ا ۲	
CITY-ST-ZIP						CITY-S			EK, Fr 34				
TITLE	···· ··			DELETE		IITLE	1-411		CHIFC UT		Change	Addition	
NAME			•			NAME				Ψ,			
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP						CITY-S							
TITLE				DELETE		IITLE	I EII			Π.	Change	Addition	
NAME			•			NAME						1,000000	
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP						CITY - S						,	
VI.1 07 Ett					0.41	פייות	1-217						

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 617, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an attachment with an address.