

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2002 8:00 am**  
**Secretary of State**

02-05-2002 90137 038 \*\*\*158.75

**DOCUMENT # P01000050935**

1. Entity Name  
**CENTRAL LEASING MANAGEMENT, INC.**

Principal Place of Business  
**1420 KENSINGTON RD., STE. 209**  
**OAK BROOK IL 60523**

Mailing Address  
**1420 KENSINGTON RD., STE. 209**  
**OAK BROOK IL 60523**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**36-4082257**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRIEL, JAMES**  
**15770 WINWARD WAY CIRCLE**  
**FT. MYERS FL 33908**

Name

**CT CORPORATION SYSTEM**

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

**1200 SOUTH PINE ISLAND ROAD**

City

**PLANTATION**

**FL**

Zip Code

**33324**

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.

**Christine M. Eastwine**  
**Assistant Secretary**

DATE

**1/29/02**

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO SECRETARY TREASURER	<input type="checkbox"/> Delete
NAME	JEFFREY WILLIAMS	
STREET ADDRESS	1420 KENSINGTON ROAD #209	
CITY-ST-ZIP	OAK BROOK IL 60523	
TITLE	PRESIDENT / DIRECTOR	<input type="checkbox"/> Delete
NAME	DANIEL OFFERMAN	
STREET ADDRESS	1420 KENSINGTON ROAD #209	
CITY-ST-ZIP	OAK BROOK IL 60523	
TITLE	VICE PRESIDENT / DIRECTOR	<input type="checkbox"/> Delete
NAME	WILLIAM BLACKWELL	
STREET ADDRESS	1420 KENSINGTON ROAD #209	
CITY-ST-ZIP	OAK BROOK IL 60523	
TITLE	VICE PRESIDENT / DIRECTOR	<input type="checkbox"/> Delete
NAME	TODD HAMMOND	
STREET ADDRESS	1420 KENSINGTON ROAD #209	
CITY-ST-ZIP	OAK BROOK IL 60523	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED TODD HAMMOND 1-31-02 (630) 928-4700**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

**CENTRAL LEASING MANAGEMENT, INC.**  
1420 KENSINGTON ROAD, SUITE 209  
OAK BROOK, IL 60523  
Telephone # (630) 928-4700

*Attachment*  
*816963*  
*# P01000050935*

**OWNERS / DIRECTORS / OFFICERS**

Jeffrey Williams, CEO, Secretary, Treasurer  
Director / Officer

35% Business Address

1000 Barberry Lane  
Mt. Prospect, IL 60056

SS# 329-68-8827  
DOB 08-3065

**CENTRAL LEASING MANAGEMENT, INC.**  
1420 Kensington Road, Suite 209  
Oak Brook, IL 60523

Daniel Opferman, President  
Director / Officer

15% Business Address

13717 Logan Drive  
Orland Park, IL 60467

SS# 323-58-0588  
DOB 04-11-62

**CENTRAL LEASING MANAGEMENT, INC.**  
1420 Kensington Road, Suite 209  
Oak Brook, IL 60523

-William Blackwell, Vice President  
Director / Officer

35% Business Address

1055 Chaffield Road  
Winnetka, IL 60093

SS# 336-52-6491  
DOB 8-18-63

**CENTRAL LEASING MANAGEMENT, INC.**  
1420 Kensington Road, Suite 209  
Oak Brook, IL 60523

Todd Hammond, Vice President  
Director / Officer

15% Business Address

711 Devonshire Lane  
Crystal Lake, IL 60014

SS# 359-46-8214  
DOB 04-25-54

**CENTRAL LEASING MANAGEMENT, INC.**  
1420 Kensington Road, Suite 209  
Oak Brook, IL 60523

State of Incorporation: Illinois  
Date of Incorporation: 01-30-95  
Duration of Corporation: Perpetual  
Number of Shares: 10,000  
Class of Shares: Common  
Series of Shares: None  
Par Value of Shares: No Par Value  
Federal Identification Number: 36-4082251  
Attorney: Aaron Shepley  
500 Coventry Lane, Suite 180  
Crystal Lake, IL 60014  
Telephone # (815) 479-0531

Registered Agent: CT Corporation

No Registered Agent in the states of:

Illinois  
Missouri  
South Carolina

Missouri Office of Central Leasing Management, Inc.  
1390 Boone Industrial Drive, Suite 110  
Telephone Number: (877) 441-9750

South Carolina Office of Central Leasing Management, Inc.  
501 W Butler Road, Suite C  
Greenville, SC 29607  
Telephone Number (888) 323-0650