

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90021 001 ***150.00

DOCUMENT # P02016

1. Entity Name

TTX COMPANY/ACORN DIVISION

Principal Place of Business

Mailing Address

**101 NORTH WACKER DRIVE
CHICAGO IL 60606****101 NORTH WACKER DRIVE
CHICAGO IL 60606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **23-1554199**

Applied For

Not Applicable

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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)

DATE

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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	PD	<input checked="" type="checkbox"/> Delete
NAME	BURTON, R.C. JR	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	LOGAN, H.V.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	REARDON, A F	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	T	<input type="checkbox"/> Delete
NAME	MARION, T.D.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	S	<input type="checkbox"/> Delete
NAME	TODD, W. F.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CONLEY, P A	
STREET ADDRESS	1416 DODGE ST	
CITY-ST-ZIP	OMAHA NE 68179	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REARDON, A.F.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO, IL 60606	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARRY, M.S.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO, IL 60606	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HULICK, R.S.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO, IL 60606	
TITLE	V & T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARION, T.D.	
STREET ADDRESS	101 NORTH WACKER DRIVE	
CITY-ST-ZIP	CHICAGO, IL 60606	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KING, R.B.	
STREET ADDRESS	1416 DODGE STREET	
CITY-ST-ZIP	OMAHA, NE 68179	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas D. Marion

04/26/01

Date

(312)853-3223

Daytime Phone #

CR2E034 (10/00)



TTX COMPANY
101 NORTH WACKER DRIVE
CHICAGO, ILLINOIS 60606
(312) 853-3223

April 27, 2001

Doc # P02016
050000

Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

Enclosed please find TTX Company/Acorn Division's completed Florida Corporation Annual Report for 2001 and a check in the amount of \$150.00 in payment of the annual filing fee.

If you should have any questions, please do not hesitate to contact me.

Sincerely,

Patrick M. Ward
Supervisor - Income Taxes

PMW:mkh
Enclosures

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