

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P07067

1. Entity Name

GENERAL EMPLOYMENT ENTERPRISES, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 91135 007 ***150.00

Principal Place of Business

Mailing Address

ONE TOWER LANE
SUITE 2100
OAKBROOK TERRACE IL 60181

ONE TOWER LANE
SUITE 2100
OAKBROOK TERRACE IL 60181

A0061634



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 36-6097429

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

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 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 CD ☐ Delete
NAME IMHOFF, HERBERT F.
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP OAKBROOK TERRACE IL 60181

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

TITLE PD ☐ Delete
NAME IMHOFF, HERBERT F. JR.
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP NAPERVILLE IL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS OAKBROOK TERRACE, IL 60181
CITY-ST-ZIP

TITLE VS ☐ Delete
NAME FROHNMAIER, NANCY C.
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP OAKBROOK TERRACE IL

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 60181

TITLE T ☐ Delete
NAME YAUCH, KENT M
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP OAKBROOK TERRACE IL

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 60181

TITLE V ☐ Delete
NAME WHITE, MARILYN L
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP OAKBROOK TERRACE IL 60181

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

TITLE V ☐ Delete
NAME CHRISOS, GREGORY
STREET ADDRESS ONE TOWER LANE -STE 2100
CITY-ST-ZIP OAKBROOK TERRACE IL 60187

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 60181

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: KENT M. YAUCH, TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01 630-954-0400

Date

Daytime Phone #

CR2E034 (10/00)