

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90199 017 \*\*\*158.75

**DOCUMENT # P12337**

1. Entity Name  
**ROBERTSON-CECO CORPORATION**



Principal Place of Business  
**2626 WARRENVILLE ROAD  
SUITE 400  
DOWNERS GROVE, IL 60515 US**

Mailing Address  
**2626 WARRENVILLE ROAD  
SUITE 400  
DOWNERS GROVE, IL 60515 US**

**40024304**



**DO NOT WRITE IN THIS SPACE**

02102005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**36-3479146**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	C
NAME	SAGE, II A
STREET ADDRESS	1730 LAKEHOUSE DRIVE
CITY-STATE-ZIP	N. PALM BEACH, FL
TITLE	P
NAME	ROSKOVENSKY, E A
STREET ADDRESS	4295 QUAIL RUN PLACE
CITY-STATE-ZIP	DANVILLE, CA
TITLE	CEO
NAME	HEISLEY, MICHAEL E
STREET ADDRESS	2626 WARRENVILLE ROAD SUITE 400
CITY-STATE-ZIP	DOWNERS GROVE, IL 60515
TITLE	<del>VICE PRESIDENT</del>
NAME	WOLSKI, LARRY
STREET ADDRESS	2626 WARRENVILLE RD. SUITE 400
CITY-STATE-ZIP	DOWNERS GROVE, IL 60515
TITLE	<del>Assistant Secretary</del>
NAME	MEADOWS, STANLEY H
STREET ADDRESS	2626 WARRENVILLE RD, SUITE 400
CITY-STATE-ZIP	DOWNERS GROVE, IL 60515
TITLE	CFO
NAME	SHUDY, KEVIN
STREET ADDRESS	2626 WARRENVILLE RD STE 400
CITY-STATE-ZIP	DOWNERS GROVE, IL 60515

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin J. Shudy **Kevin J. Shudy** 2/15/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #