

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90042 013 ***150.00

DOCUMENT # P12902

1. Entity Name
ANDREW SYSTEMS INC.

Principal Place of Business 10500 W. 153RD STREET ATTN: LYNN ECKHARDT ORLAND PARK IL 60462	Mailing Address 10500 W. 153RD STREET ATTN: LYNN ECKHARDT ORLAND PARK IL 60462
--	--

914238



DO NOT WRITE IN THIS SPACE

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 36-3243568	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---	--

11. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	CHARLTON, T.E.	
STREET ADDRESS	10500 W. 153RD STREET	
CITY-ST-ZIP	ORLAND PARK IL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	HUTTENBURG, DEBRA B	
STREET ADDRESS	10500 W. 153RD ST	
CITY-ST-ZIP	ORLAND PARK IL 60462	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	NICHOLAS, CHARLES R.	
STREET ADDRESS	10500 W. 153RD STREET	
CITY-ST-ZIP	ORLAND PARK IL	
TITLE	S	<input type="checkbox"/> Delete
NAME	PETELLE, JAMES F.	
STREET ADDRESS	10500 W. 153RD STREET	
CITY-ST-ZIP	ORLAND PARK IL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ENGLISH, FLOYD L.	
STREET ADDRESS	10500 W. 153RD ST.	
CITY-ST-ZIP	ORLANDO PARK IL	
TITLE	T	<input type="checkbox"/> Delete
NAME	GITTELMAN, M.J.	
STREET ADDRESS	10500 W. 153RD ST.	
CITY-ST-ZIP	ORLANDO PARK IL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President + Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GUY M. Campbell	
STREET ADDRESS	10500 W 153rd Street	
CITY-ST-ZIP	Orland Park, IL 60462	
TITLE	VP + Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gregory F. Maruszak	
STREET ADDRESS	10500 W 153rd Street	
CITY-ST-ZIP	Orland Park, IL 60462	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James Mellvain	
STREET ADDRESS	10500 W 153rd Street	
CITY-ST-ZIP	Orland Park, IL 60462	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Donn Peterson	
STREET ADDRESS	10500 W 153rd Street	
CITY-ST-ZIP	Orland Park, IL 60462	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	M. Jeffrey Gittelman	
STREET ADDRESS	10500 W. 153rd Street	
CITY-ST-ZIP	Orland Park, IL 60462	
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: M.J. Gittelman **M.J. Gittelman** 1/22/01 708-349-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)