FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P14296

(8)

360 COMMUNICATIONS COMPANY OF FLORIDA												
Principal Place of Business Mailing Address									- (ITH DIVIN ONDA	FOR THE STATE OF T	i 01111 (60)
	•	•	8725 HIGGINS ROAD									
8725 HIGGINS ROAD B725 HIGGINS ROAD CHICAGO IL 80831 CHICAGO IL 80831												
									DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or Qualified 05/05/1987			
	Principal P	lace of Busin	ess	2a. Mailing Address				4. FEI Number		⊢-+-	plied For	
21	Suite, Apt. #, etc.			26	Suite, Apt. #, etc.				36-3506530			ot Applicable
22	Suite, Apt. #, etc.			27			5. Certificate of Status Desired		\$8.75 / Fee Re			
	City & State			City & State				6. Election Campaign Financing	-1.5	\$5.00	May Be	
23		·		28				Trust Fund Contribution		Added 1		
	Zip	Country 25		Zip	——————————————————————————————————————		ountry		8. This corporation owes or has p			
24			29]	30	Personal Property Tax of 10. Name and Address of							
S. Name and Address of Current Registered Agent C T CORPORATION SYSTEM							Name		10, Hallie Bild Address of How H	og:stereu	v Aquit	
1200 S PINE ISLAND RD						82 Street Addre			ss (P.O. Box Number is Not Accepta	ble)		
PLANTATION FL 33324					[10010	oo (1.0. pox raunios 15 rot recopia			
						84 City				FL	85 Zip (Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid. 							e-named y the corp	corpo oratio	oration submits this statement for the on's board of directors. I hereby according to the control of the contro	purpose o	f changing it pointment as	s registered registered
SIG	NATURE											
40		Signature typed	agregional (the diapplicable). (N ND DIRECTORS	(NOTE: Registered Agent signature require			required	_ <u></u>	DATE OF DO AND	DIDECTOR	C 151 4 0	
12. Titu	F T	PCEO	OFFICENSA	DELETE		1,1 TiTLE			ADDITIONS/CHANGES TO OFF	CERS AND	Change	Addition
NAM	IE J	DENNIS E. FOSTER			1.2 N	1.2 NAME						
STRE	TILL I TO DITE OF		ggins road			1.3 STREET ADDRESS						
CITY	-ST-ZIP CHICAG		O IL		1.40	1.4 CITY+ST-ZIP			_			
Titu	E	VP		☐ DELETE	2.1 T	2.1 TITLE					Change	Addition
NAM			r, gregg s			2.2 NAME						
STRE			GGINS ROAD			2.3 STREET ADDRESS						
	Y-ST-ZIP CHICAG		U IL				ST-ZIP					100
TITLE			HER, KEVIN C.	DELETE		31 TITLE					L Change	Addition
	0705 41		GGINS ROAD		. E	3.2 NAME						
	STREET ADDRESS 6/25 HI CHICAG					3.3 STREET ADDRESS						
TITLE					3.4 CITY-ST-ZIP 4.1 TITLE					Change	Addition	
NAM	- 1		'L, PETER	(- 1	2 NAME					C Change	
			GGINS ROAD				- 1					!
			O IL			4.3 STREET ADDRESS 4.4 CHTY-ST-ZIP						
TITLE	1-01-211			DELETE	5.1 TITLE		31 11		····		Change	Addition
			MICHAEL J.		5.2 N		ļ				=	1
	EET ADDRESS	8725 HI	3GINS ROAD				T ADDRESS					
CITY-ST-ZIP		CHICAG	O IL			4 CITY - ST - ZIP						[
TITLE		SVAS		DELETE	6.1 7						Change	Addition
NAM	E	Burge,		62 N	62 NAME						ĺ	
STOR LIN			JUNG BUAD		1							i

14. Thereby 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 annual report or supplemental arrival 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 13 if changed, or our patternial cent with an address.

SIGNATURE:

CITY-ST-ZIP

CHICAGO IL

Allemen

Gregg Swarper 4/24/98973.399-264

FILED

May 19 1998 8:00am

Secretary of State