

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P16104

(2)

1. Corporation Name

RAYMOND PROPERTIES, INC.

Principal Place of Business

697 S BLACKHAWK BLVD
ROCKTON IL 61072

Mailing Address

P.O. BOX 406
ROCKTON IL 61072
US



3. Date Incorporated or Qualified
09/24/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOLLINGER, MICHAEL
PROPERTY ASSET MANAGEMENT
4919 MEMORIAL HIGHWAY SUITE 100
TAMPA FL 33634

81

Name John E. McMillan

82

Street Address (P.O. Box Number is Not Acceptable)

Levin and McMillan, Attorneys
9385 56th St., Suite 200

83

84

City Temple Terrace

FL

85

Zip Code 33617

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

John E. McMillan

4-29-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME TETZLAFF, RAYMOND L.
STREET ADDRESS 697 S. BLACKHAWK BLVD.
CITY- ST- ZIP ROCKTON IL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE S
NAME ERICH, JOHN A.
STREET ADDRESS 111 EAST WISCONSIN AVE.
CITY- ST- ZIP MILWAUKEE WI

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE V
NAME GULDEMOND, JOANNE
STREET ADDRESS 697 S BLACKHAWK BLVD.
CITY- ST- ZIP ROCKTON IL 61072

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joanne Guldemond

Date

815 624-2631

Daytime Phone #

ext 20

CP2E034 (12/95)