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May 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P16407 (9)

1. Corporation Name  
ABN AMRO INVESTMENT SERVICES, INC.



Principal Place of Business  
181 W. MADISON  
#3200  
CHICAGO IL 60602  
US

Mailing Address  
135 S. LASALLE ST  
C/O MARTIN L. EISENBERG  
CHICAGO IL 60603-4105  
US

3. Date Incorporated or Qualified  
10/16/1987

3a. Date of Last Report  
04/24/1996

4. FEI Number  
36-3558925

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent  
CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	JOHNSTON, THOMAS	
STREET ADDRESS	181 W. MADISON	
CITY - ST - ZIP	CHICAGO IL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HEAGY, THOMAS	
STREET ADDRESS	181 W. MADISON	
CITY - ST - ZIP	CHICAGO IL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	WAJDA, EDWARD	
STREET ADDRESS	181 W. MADISON	
CITY - ST - ZIP	CHICAGO IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HEITMAN, SCOTT K.	
STREET ADDRESS	135 S. LASALLE ST.	
CITY - ST - ZIP	CHICAGO IL 60603	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	EISENBERG, MARTIN L.	
STREET ADDRESS	135 S. LASALLE ST.	
CITY - ST - ZIP	CHICAGO IL 60603	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	QUINN, ROBERT K.	
STREET ADDRESS	135 S. LASALLE ST.	
CITY - ST - ZIP	CHICAGO IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/Treasurer/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Wilbert A. Thiel	
1.3 STREET ADDRESS	208 S. LaSalle St.	
1.4 CITY - ST - ZIP	Chicago, IL 60604	
2.1 TITLE	Chairman of the Board/Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	John A. Wing	
2.3 STREET ADDRESS	208 S. LaSalle St.	
2.4 CITY - ST - ZIP	Chicago, IL 60604	
3.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	James Wynsma	
3.3 STREET ADDRESS	135 S. LaSalle St.	
3.4 CITY - ST - ZIP	Chicago, IL 60603	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Perry L. Taylor, Jr.	
6.3 STREET ADDRESS	208 S. LaSalle St.	
6.4 CITY - ST - ZIP	Chicago, IL 60604	

14. I do 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 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: Martin L. Eisenberg 04/24/97 (312) 904-2209  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice President Date Daytime Phone #

CR2E034 (9/96)