

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P18609 (8)

1. Corporation Name

ZENITH VIDEO TECH CORPORATION - FLORIDA

Principal Place of Business

1900 N. AUSTIN AVE.,
CHICAGO IL 60639-2079

Mailing Address

1000 MILWAUKEE AVE
GLENVIEW IL 60025
US



3. Date Incorporated or Qualified

03/29/1988

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 1000 MILWAUKEE AVE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 GLENVIEW IL

28

Zip

Country

Zip

Country

24 60025

25 US

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME WADDEN, JOHN W.
STREET ADDRESS ~~100 MILWAUKEE AVENUE~~
CITY-ST-ZIP GLENVIEW IL ☐ DELETE

1.1 TITLE
1.2 NAME ☒ Change ☐ Addition
1.3 STREET ADDRESS 1000 MILWAUKEE AVENUE
1.4 CITY-ST-ZIP

TITLE V
NAME KEAHE, THOMAS J.
STREET ADDRESS ~~100 MILWAUKEE AVENUE~~
CITY-ST-ZIP GLENVIEW IL ☐ DELETE

2.1 TITLE
2.2 NAME ☒ Change ☐ Addition
2.3 STREET ADDRESS 1000 MILWAUKEE AVENUE
2.4 CITY-ST-ZIP

TITLE SD
NAME LEVIN, DAVID S.
STREET ADDRESS 1000 MILWAUKEE AVENUE
CITY-ST-ZIP GLENVIEW IL ☒ DELETE

3.1 TITLE SD
3.2 NAME RICHARD F. VITKUS
3.3 STREET ADDRESS 1000 MILWAUKEE AVENUE
3.4 CITY-ST-ZIP GLENVIEW IL 60025 ☒ Change ☐ Addition

TITLE T
NAME MCNITT, WILLARD C.
STREET ADDRESS 1000 MILWAUKEE AVE
CITY-ST-ZIP GLENVIEW IL ☐ DELETE

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

TITLE D
NAME BENSON, KELL B.
STREET ADDRESS 1000 MILWAUKEE AVENUE
CITY-ST-ZIP GLENVIEW IL ☒ DELETE

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

TITLE D
NAME WEBER, STEPHEN K.
STREET ADDRESS 1000 MILWAUKEE AVENUE
CITY-ST-ZIP GLENVIEW IL ☐ 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-96
WILLARD C. MCNITT TREASURER (847) 391-7000

Date

Daytime Phone

CR2E034 (12/95)