


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State


DOCUMENT # P19621
 1. Entity Name
WILSONART INTERNATIONAL, INC.



Principal Place of Business
**2400 WILSON PLACE/P O BOX 6110
 TEMPLE, TX 76503-110 US**

Mailing Address
**3600 WEST LAKE AVE
 GLENVIEW, IL 60025 US**

DO NOT WRITE IN THIS SPACE



04202004 No Chg-P CR2E034 (10/03)

4. FEI Number
36-3578230 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	PEEK, GAIL L
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	V
NAME	MCGRATH, ROBERT V
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	AS
NAME	MANCUSO, GREGORY J
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	VTD
NAME	RODRIGUEZ, FELIX L
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	VSD
NAME	HUDNUT, STEWART S
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025
TITLE	P
NAME	REEB, WILLIAM R
STREET ADDRESS	3600 WEST LAKE AVE
CITY-ST-ZIP	GLENVIEW, IL 60025

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 04/27/04-90050-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert V. McGrath **ROBERT V. MCGRATH** 4/21/2004 847-724-7500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/In Phone #