

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90882 048 ***150.00

0608917 AT

DOCUMENT # P19973

1. Entity Name

HILL RESEARCH GROUP, INC.

Principal Place of Business

**300 MARQUARDT DRIVE
WHEELING IL 60090
US**

Mailing Address

**300 MARQUARDT DRIVE
WHEELING IL 60090
US**

2. Principal Place of Business

**1340 Remington Road
Suite S**

3. Mailing Address

**1340 Remington Road
Suite S**

City & State

Schaumburg, Illinois

City & State

Schaumburg, Illinois

Zip

60173-4821

Country

USA

Zip

60173-4821

Country

USA

4. FEI Number

36-3580719

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **HILL, DENNIS**
STREET ADDRESS **300 MARQUARDT DR.**
CITY-ST-ZIP **WHEELING IL**

TITLE **SD** ☐ Delete
NAME **VOGLER, JAMES R**
STREET ADDRESS **330 N. WABASH AVENUE., SUITE 3300**
CITY-ST-ZIP **CHICAGO IL**

TITLE **VP** ☐ Delete
NAME **KRIEG, MARGARET M**
STREET ADDRESS **300 MARQUARDT DRIVE**
CITY-ST-ZIP **WHEELING IL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1340 Remington Road, Suite S**
CITY-ST-ZIP **Schaumburg, Illinois 60173-4821**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **333 W. Wacker Drive, Suite 2700**
CITY-ST-ZIP **Chicago, Illinois 60606**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1340 Remington Road, Suite S**
CITY-ST-ZIP **Schaumburg, Illinois 60173-4821**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Required

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/2002 312/984-3182

Date

Daytime Phone #

CR2E034 (9/01)