

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90295 050 ***150.00

DOCUMENT # P20310

1. Entity Name
ADVANCED TECHNOLOGY SERVICES, INC.



Principal Place of Business

8201 N. UNIVERSITY
PEORIA, IL 61615 US

Mailing Address

8201 N. UNIVERSITY
PEORIA, IL 61615 US



04222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-1174273

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

**DO NOT WRITE
IN THIS SPACE**

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

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

(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	PD
NAME	BLAUDOW, RICHARD W.
STREET ADDRESS	8201 N UNIV ST
CITY-ST-ZIP	PEORIA, IL
TITLE	S
NAME	GRESHAM, DIANNE
STREET ADDRESS	8201 N UNIV ST
CITY-ST-ZIP	PEORIA, IL
TITLE	VP
NAME	RAINEY, JOHN L
STREET ADDRESS	8201 N. UNIVERSITY
CITY-ST-ZIP	PEORIA, IL
TITLE	D
NAME	JONES, DANIEL S
STREET ADDRESS	635 WEED STREET
CITY-ST-ZIP	NEW CANAAN, CT 06840
TITLE	D
NAME	LANDIS, HOWARD
STREET ADDRESS	36 GROVE STREET
CITY-ST-ZIP	NEW CANAAN, CT 06840
TITLE	D
NAME	LONESE, EUGENE P JR
STREET ADDRESS	.75 ARROWHEAD TRL
CITY-ST-ZIP	NEW CANAAN, CT 06840

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/04
Date

Daytime Phone #

Attachment 44038801

P20310

Advanced Technology Services, Inc.
List of Officers

<u>Name</u>	<u>Title</u>	<u>Address</u>
Jeffrey A. Owens	Vice President	8201 N. University St., Peoria, IL 61615
Vern R. Lefler	Vice President	8201 N. University St., Peoria, IL 61615
John R. McEllin	Vice President	8201 N. University St., Peoria, IL 61615
Richard E. Travis	Vice President	8201 N. University St., Peoria, IL 61615
Ronald F. Inghilterra	Vice President	8201 N. University St., Peoria, IL 61615