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 #P20807 1. Corporation Name				
SIGNA	AL CAPITAL CORPORATIO	ON		
Principal Place of Business		Mailing Address		
4711 GOLF ROAD		c/o ANIXTER INT'L. INC.		
SKOKIE, IL 60076		4711 GOLF ROAD		3. Date Incorporated or Qualified 3a. Date of Last Report
		SKOKIE, IL	60076	09/08/1988 04/26/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
Suite, Apt. #, etc.		Sulle, Apt. #. etc.		02-0425522 Not Applicable
22		27		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & Stale		6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	710	Comple	Trust Fund Contribution
24	25	Zip 29	Country 30	B. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes M No
•	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.				me
•1201 HAYS STREET			82 Stre	eet Address (P.O. Box Number is Not Acceptable)
SUITE 105			83	
TALLAH	ASSEE, FL 32301		84 City	
			' '	FL 10 11 11 11 11 11 11 1
OL TOUISIEL	rea agent, or court, in the State of Fioria	a. Such change was authorize	s, the above-named d by the corporation	od corporation submits this statement for the purpose of changing its registered office on's board of directors. I hereby accept the appointment as registered agent. I am
iamiliar wi	th, and accept the obligations of, Section	on 607.0505, Florida Statutes.		,,
SIGNATURE	Signature, typico or printed name of registered agent a	old title it appreatite (NOT	L. Rogistered Agent signati	ature: reqn⊮od when reinstating) DA1E
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TÎTLE T NAME	PRESIDENT	☐ DELETE	1. 1 TITLE	Change Addition
STREET ADDRESS	EBEN S. MOULTON 55 FERNCROFT ROAD		1.2 NAME 1.3 STREET ADDRES	FSC
CITY-ST-ZIP	DANVERS, MA 01923		1.4 CiTY-ST-ZIP	
TITLE 1	VP	DELETE	2 1 TITLE	Change Addition
NAME	WALTER H. LEONARD		2.2 NAME	
STREET ADDRESS CITY-ST-ZIP	55 FERNCROFT ROAD		2.3 STREET ADORES	ESS
TITLE	DANVERS, MA 01923	DELETE	2.4 C(TY - S1 - Z(P 3.1 T(TLE)	Change Addition
NAME	SECRETARY JAMES E. KNOX		3.2 NAME	
STREET ADDRESS	2 N. RIVERSIDE PLAZA	1	3.3. STREET ADDRE	RESS
CITY-ST-ZIP TITLE	CHICAGO, IL 60606	DELETE	3 4 CITY - ST - ZIP	
NAME	ASST. SECY.	breen	4 1 TITLE 4.2 NAME	Change Addition
STREET ADDRESS	PHILIP F. MENO 2 N. RIVERSIDE PLAZ <i>I</i>		4.3 STREET ADDRES	ess —1.19b
CITY-ST-ZIP	CHICAGO, IL 60606		4 4 CITY - ST - ZIP	7/1/5
TITLE	CONTROLLER	DELETE	5. 1 TITLE	Chartye Addition
NAME STREET ADDRESS	ARTHUR ZAHN		5.2 NAME 5.3 STREET ADDRES	SEPTIP
CITY-ST-ZIP	55 FERNCROFT RD DANVERS, MA 01923		5.4 Crity-SI-ZiP	7
TITLE	DIRECTOR	☐ DELETE	6 1 TITLE	400001840444 Addition
NAME	ROD F. DAMMEYER		6.2 NAME	-05/28/9601025034
STREET ADDRESS	2 N. RIVERSIDE PLAZA	1	6.3 STREET ADDRES	
14. I do hereb			6.4 CITY-ST-ZIP shed and does not d	qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further of accurate and that my signature shall have the same legal effect as if made under
certify that	the information indicated on this annua	il report or supplemental annu	al report is true and	d 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 diagond, or one appears in Block 12 or Block 13 if diagond, or one appears in Block 12 or Block 13 if diagond, or one appears in Block 12 or Block 13 if diagond, or one appears in Block 13 if diagond in

PHILIP F. MENO, ASST. SECY. 4/29/96 (847)677-2600