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 # **P24084** **(6)**

1. Corporation Name
HARRIS-SL CORP.

Principal Place of Business
2 NORTH LASALLE STREET
SUITE 400
CHICAGO IL 60602
US

Mailing Address
2 NORTH LASALLE STREET
SUITE 400
CHICAGO IL 60602
US

3. Date Incorporated or Qualified: 04/26/1989
3a. Date of Last Report: 04/20/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 36-3640221 — Applied For ☐ Not Applicable ☐

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
THE PRENTICE HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
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 of a director or officer of the corporation) (Date) (Registered Agent's signature required if statement is filed) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	NEUERMAN, MARC A.	
STREET ADDRESS	2 N LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	V	☐ DELETE
NAME	PETERMAN, FREDERICK	
STREET ADDRESS	2 N LASALLE STREE 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	S	☒ DELETE
NAME	KAYNER, DAVID J.	
STREET ADDRESS	203 N. LASALLE ST, #1800	
CITY-ST-ZIP	CHICAGO IL	
TITLE	T	☐ DELETE
NAME	NEUMAYER, GARY	
STREET ADDRESS	2 NORTH LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	☐ DELETE
NAME	KAHN, JEROME, JR.	
STREET ADDRESS	2 N LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	☐ DELETE
NAME	HARRIS, IRVING B.	
STREET ADDRESS	2 NORTH LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	PETER E. MARTIN	
1.3 STREET ADDRESS	2 N LASALLE ST, STE 400	
1.4 CITY-ST-ZIP	CHICAGI, IL 60602	
2.1 TITLE	V/D	☐ Change ☒ Addition
2.2 NAME	JACK R. POLSKY	
2.3 STREET ADDRESS	2 N LASALLE ST, STE 400	
2.4 CITY-ST-ZIP	CHICAGO, IL 60602	
3.1 TITLE	S	☐ Change ☒ Addition
3.2 NAME	PATRICIA S. MILLER	
3.3 STREET ADDRESS	2N LASALLE ST, STE 400	
3.4 CITY-ST-ZIP	CHICAGI, IL 60602	
4.1 TITLE	D/C	☐ Change ☒ Addition
4.2 NAME	IRVING B. HARRIS	
4.3 STREET ADDRESS	2 N LASALLE ST, STE 400	
4.4 CITY-ST-ZIP	CHICAGO, IL 60602	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 of changed, or on an attachment with an address.

SIGNATURE: President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PETER E. MARTIN, PRESIDENT

Date: 1/19/96 Daytime Phone #: 312/621-0389

CR2E034 (12/95)