

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P24776** (7)  
1. Corporation Name  
**SIGNATURECARD, INC.**



Principal Place of Business  
**C/O DAN BLINDAUER  
200 N. MARTINGALE RD.  
SCHAUMBURG IL 60173-9096**

Mailing Address  
**C/O DAN BLINDAUER  
200 N. MARTINGALE RD.  
SCHAUMBURG IL 60173-9096**

DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Incorporated or Qualified</b> 06/15/1989	
<b>21</b>		<b>26</b>		<b>4. FEI Number</b> 36-2877527	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>22</b>		<b>27</b>		<b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>23</b>		<b>28</b>			
Zip	Country	Zip	Country		
<b>24</b>	<b>25</b>	<b>29</b>	<b>30</b>		

**9. Name and Address of Current Registered Agent**

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
PLANTATION FL 32301**

**10. Name and Address of New Registered Agent**

<b>81</b>	Name
<b>82</b>	Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>	
<b>84</b>	City
<b>FL</b>	<b>85</b> 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALLAGHER, RICHARD C	1.2 NAME	
STREET ADDRESS	200 N. MARTINGDALE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SCHAUMBURG IL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>VOLLMAN, SANDRA K</del>	2.2 NAME	
STREET ADDRESS	<del>200 N. MARTINGDALE ROAD</del>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<del>SCHAUMBURG IL</del>	2.4 CITY-ST-ZIP	
TITLE	VS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EUWEMA, JOHN B	3.2 NAME	
STREET ADDRESS	200 N. MARTINGDALE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	SCHAUMBURG IL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASEY, PATRICK J.	4.2 NAME	
STREET ADDRESS	200 N. MARTINGDALE ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	SCHAUMBURG IL	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOYER, LYMAN C	5.2 NAME	
STREET ADDRESS	200 N. MARTINGDALE ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	SCHAUMBURG IL	5.4 CITY-ST-ZIP	
TITLE	<del>VP</del>	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>PORTTELL, ALAN F</del>	6.2 NAME	
STREET ADDRESS	<del>200 N. MARTINGDALE RD</del>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<del>SCHAUMBURG IL</del>	6.4 CITY-ST-ZIP	

**14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same effect as if 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 is on Block 12 or Block 13 if changed, or on an attachment with an address.**

SIGNATURE

PATRICK J. CASEY

1-20-98

May Ann Carab

CR2E034 (10/97)