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May 06, 1999 8:00 am
Secretary of State

05-06-1999 90251 014 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24776

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

3. Date Incorporated or Qualified

06/15/1989

4. FEI Number

36-2877527

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **GALLAGHER, RICHARD C**
STREET ADDRESS **200 N. MARTINGDALE ROAD**
CITY-ST-ZIP **SCHAUMBURG IL**

TITLE **VPC** ☒ DELETE
NAME **VOLLMAN, SANDRA K**
STREET ADDRESS **200 N. MARTINGDALE ROAD**
CITY-ST-ZIP **SCHAUMBURG IL**

TITLE **VS** ☐ DELETE
NAME **EUWEMA, JOHN B**
STREET ADDRESS **200 N. MARTINGDALE ROAD**
CITY-ST-ZIP **SCHAUMBURG IL**

TITLE **T** ☐ DELETE
NAME **CASEY, PATRICK J.**
STREET ADDRESS **200 N. MARTINGDALE ROAD**
CITY-ST-ZIP **SCHAUMBURG IL**

TITLE **AS** ☐ DELETE
NAME **MOYER, LYMAN C**
STREET ADDRESS **200 N. MARTINGDALE ROAD**
CITY-ST-ZIP **SCHAUMBURG IL**

TITLE **EVP** ☒ DELETE
NAME **PORTELLI, ALAN F**
STREET ADDRESS **200 N MARTINGALE RD**
CITY-ST-ZIP **SCHAUMBURG IL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

CEO
LINEN, WORTHINGTON W.
200 N. MARTINGDALE ROAD
SCHAUMBURG, IL

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

VPC
OVER, JANICE M.
200 N. MARTINGDALE ROAD
SCHAUMBURG, IL

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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 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

4-23-99

Date

Daytime Phone #

CR2E034 (11/98)