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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P2755

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AMERITECH CREDIT CORPORATION

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FILED

May 12 1998 8:00am

Secretary of State

AMEHI	iegh Chedii Corporat	IUN				
Principal Plac	e of Businoss	Mailing Address	Mailing Address		4 JODNIODI LIR BLOK ERDƏN BAYƏN DIYAL BYAN AYDIR	AIBH DIOIL BIEIL BHAN BHAN 1801
2550 W GOL	FRD	2550 W GOLF RD				
ROLLING ME	ADOWS IL 60008	ROLLING MEADOWS IL	60008		DO NOT WRITE IN TI	UIO 0040E
					3. Date Incorporated or Qualified	115 SPACE
					01/03/1990	
— ·	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		36-3284986	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		4 Floring O 1 F	Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	7 ip	Coun	try	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ant Registered Agent			10. Name and Address of New Registe	red Agent
	CORPORATION SYSTEM		8	Name		
1200 SOUTH PINE ISLAND RD.			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
PL	ANTATION FL 33324		L			
			[8	13		
,			8	4 City	1	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	Signature, typed or printed name of registered a	gent and title if applicable (NOT	E Registered A	gent signature req	ulred when reinstating) DAI	E
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	HORSLEY, R. S	☐ DELETE	1.1 TITLE	:		Change Addition
NAME	2550 W GOLF RD		1.2 NAM	-		
STREET ADDRESS	ROLLING MEADOWS IL			ET ADDRESS		
CITY-ST-ZIP TITLE	S S	DELETE	1.4 CITY			DA Dada
NAME	SPRACKER, MARILYN	□ betere	2.1 TITLE]		☐ Change ☐ Addition
STREET ADDRESS	30 S. WACKER DRIVE		2.2 NAM	ET ADORESS		
CITY-ST-ZIP	CHICAGO IL		2.4 City			
TITLE	7	DELETE 3.1				Change Addition
NAME	MASON, JEFFREY R		3.2 NAM	.		
STREET ADDRESS	2550 W GOLF RD			ET AODRESS		
CITY-ST-ZIP	ROLLING MEADOWS IL		3.4. CITY			
TITLE	VP	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	SILVERMAN, DANIEL		4. 2 NAM	E [
STREET ADDRESS	2550 W. GOLF RD.		4.3 STRE	ET ADDRESS		
CITY-ST-ZIP	ROLLING MEADOWS IL		4.4 CITY	-ST-ZIP		
TITLE	AS	☐ DELETE	5.1 TITLE	1		Change Addition
NAME	HOWATT, BRUCE		5.2 NAME			
STREET ADORESS	30 S. WACKER DR. CHICAGO IL			ET ADDRESS		
CITY-ST-ZIP	U HUAGU IL	DOLLE	54 CITY			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME STREET ADDRESS			6.2 NAME			
				ET ADDRESS		
CITY-ST-ZIP	·		6.4 CITY-	31-AP		

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 13 if changed, or on an attachment with an address.

SIGNATURE:

Mailun Spri

Marilyn Spracker

4/28/98312 658-2840

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