

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLOUIDA DEPARTMENT OF STATE
Sandra B. Morihara
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P28023 (0)

1. Corporation Name

HENRY PRATT COMPANY



Principal Place of Business

401 S. HIGHLAND AVE.
AURORA IL 60506

Mailing Address

401 S. HIGHLAND AVE.
AURORA IL 60506

3. Date Incorporated or Qualified
02/07/1990

3a. Date of Last Report
04/04/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number
36-3658415

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

STARK, WALTER J.
4301 32ND ST., WEST
STE. E-2
BRADENTON FL 34205

81 Name
LEMAY STARK ENTERPRISE INC

82 Street Address (P.O. Box Number is Not Acceptable)
13947 GERANZUM PL.

84 City
WELLINGTON

85 FL Zip Code
33414

10. Name and Address of New Registered Agent

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 I accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

ROBERT C. LEMAY

Robert C. Lemay

4/15/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	HOLTGRAVER, EDWARD G.	
STREET ADDRESS	401 SOUTH HIGHLAND AVENUE	
CITY-ST-ZIP	AURORA IL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	TONY LALLY	
STREET ADDRESS	401 S. HIGHLAND AVENUE	
CITY-ST-ZIP	AURORA IL	
TITLE	DR	<input type="checkbox"/> DELETE
NAME	BERGER, RANDY L.	
STREET ADDRESS	401 SOUTH HIGHLAND AVENUE	
CITY-ST-ZIP	AURORA IL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1-2 NAME	
1-3 STREET ADDRESS	
1-4 CITY-ST-ZIP	
2-1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2-2 NAME	
2-3 STREET ADDRESS	
2-4 CITY-ST-ZIP	
3-1 TITLE	CONTROLLER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3-2 NAME	
3-3 STREET ADDRESS	
3-4 CITY-ST-ZIP	
4-1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4-2 NAME	
4-3 STREET ADDRESS	
4-4 CITY-ST-ZIP	
5-1 TITLE	
5-2 NAME	
5-3 STREET ADDRESS	
5-4 CITY-ST-ZIP	
6-1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6-2 NAME	
6-3 STREET ADDRESS	
6-4 CITY-ST-ZIP	

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***200.00

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 if changed, or on an attachment with an address.

SIGNATURE:

Randy L. Berger R.L. BERGER CONTROLLER

3/22/96

708-844-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

REGISTERED PHONE #

CR2E034 (12/95)

NS
4-19