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FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P31036

(7)

1. Corporation Name

BD TWO, INC.

Principal Place of Business

Mailing Address

ONE FIRST NATIONAL PLAZA
SUITE 0308
CHICAGO, IL 60670

3. Date Incorporated or Qualified
09/21/1990

3a. Date of Last Report
05/15/1997

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

4. FEI Number

363721369

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT ☐ DELETE
NAME MALEY, JAMES J.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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

TITLE VICE PRESIDENT ☐ DELETE
NAME BOWER, THOMAS T.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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

TITLE SECRETARY ☐ DELETE
NAME HABICHT, PATRICIA T.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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

TITLE TREASURER ☐ DELETE
NAME ROBERTS, WILLIAM J.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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

TITLE ASSISTANT TREASURER ☐ DELETE
NAME WULF, CLARK J.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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

TITLE ASSISTANT TREASURER ☐ DELETE
NAME DONOVAN, JAMES E.
STREET ADDRESS ONE FIRST NATIONAL PLAZA
CITY - ST - ZIP CHICAGO, IL 60670

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 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.

SIGNATURE:

Clark J. Wulf
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/98

Date

312-407-8120

Daytime Phone #

CR2034 (9/96)