

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P31871

1. Entity Name  
JB ONE, INC.

**FILED**  
**Jan 29, 2001 8:00 am**  
**Secretary of State**

01-29-2001 90065 006 \*\*\*150.00

Principal Place of Business Mailing Address  
1 BANK ONE PLAZA 1 BANK ONE PLAZA  
SUITE 0308 SUITE 0308  
CHICAGO IL 60670-7308 CHICAGO IL 60670-7308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.  
3. Mailing Address Suite, Apt. #, etc.

City & State City & State

4. FEI Number 36-3721372 Applied For  
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

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

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME MALEY, JAMES J.  
STREET ADDRESS 1 1ST NAT. PL., #0174  
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE Asst. Treasurer  
NAME Charles Woodling  
STREET ADDRESS 1 Bank One Plz Ste 0308  
CITY-ST-ZIP Chicago IL 60670 ☐ Change ☒ Addition

TITLE VD  
NAME BOWER, THOMAS T  
STREET ADDRESS 1 1ST NATL. PLAZA, #0174  
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S  
NAME HABICHT, PATRICIA T.  
STREET ADDRESS 1 1ST NAT. PL., #0174  
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME YARDLEY, JACQUELINE  
STREET ADDRESS 1 BANK ONE PLAZA  
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME ROBERTS, WILLIAM J.  
STREET ADDRESS 1 NORTH DEARBORN, #0310  
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AT  
NAME WULF, CLARK J.  
STREET ADDRESS 1 1ST NAT. PL. #0308  
CITY-ST-ZIP CHICAGO IL 60670 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charles Woodling* Charles Woodling  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/01 (312) 407-8859  
Date Daytime Phone #

CR2E034 (10/00)