

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35230 (2)

1. Corporation Name

CAMCO MANAGEMENT COMPANY



Principal Place of Business

1201 N. CLARK, SUITE 400
CHICAGO IL 60610-2270

Mailing Address

1201 N. CLARK, SUITE 400
CHICAGO IL 60610-2270

3. Date Incorporated or Qualified

08/26/1991

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

36-3000126

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 607.1506, 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 or director

Signature typed or printed name of registered agent or director

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D
NAME MCKAY, TERRY A.
STREET ADDRESS 1201 N. CLARK ST., #300
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

D
NAME ROSENBERG, THOMAS B.
STREET ADDRESS 1201 N. CLARK ST., #300
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

P
NAME KENNEDY, CARLA YOUNG
STREET ADDRESS 1201 N CLARK ST #400
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

VP
NAME GILL, PATRICIA A.
STREET ADDRESS 1201 N CLARK ST #400
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

ST
NAME ARCHIE, RONALD D.
STREET ADDRESS 1201 N CLARK ST #400
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

CFO
NAME CANDELLA, JOSEPH P
STREET ADDRESS 1201 N. CLARK STREET #400
CITY-ST-ZIP CHICAGO IL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

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

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD D. ARCHIE

4-29-96

312/335-2650

CR2E034 (12/95)