


**2004 FOR PROFIT-CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P36809 1. Entity Name DRAPER AND KRAMER INVESTMENTS CORP.	
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Principal Place of Business
33 WEST MONROE STREET
CHICAGO, IL 60603

Mailing Address
33 WEST MONROE STREET
19TH FLOOR, ATTN: L. MADSEN
CHICAGO, IL 60603



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number 36-3801363	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MADSEN, LORRAINE N 33 W MONROE ST., 19TH FL CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FORD, FREDERICK C. 33 WEST MONROE ST. CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BAILEY, FORREST D 33 W MONROE ST, 19TH FL CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRAMER, ANTHONY F. 33 WEST MONROE ST. CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SALTZMAN, LOUISE P. 760 BRONSON HIGHLAND PARK, IL 60035
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAILEY, BARBARA K. 3737 GILLHAM ROAD KANSAS CITY, MO 64111

000000136864
04/29/04-80019-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lorraine N. Madsen* Lorraine N. Madsen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04 312-795-2220
Date Daytime Phone #