2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004
Secretary of State

DOCUMENT# P37453

Entity Name: FMRP INC.

Current Principal Place of Business:

100 S SAUNDERS RD
LAKE FOREST, IL 60045 US

New Principal Place of Business:

Current Mailing Address:

100 S SAUNDERS RD
ATTN: TAX DEPT
LAKE FOREST, IL 60045 US

New Mailing Address:

FEI Number: 72-1122135 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PCEO	( ) Delete
Name:	PERTZ, DOUGLAS A	
Address:	100 S. SAUNDERS RD.	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:	VD	( ) Delete
Name:	PORTER, J. REID	
Address:	100 S. SAUNDERS RD.	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:	S	( ) Delete
Name:	WILLIAMS, ROSE M	
Address:	100 S. SAUNDERS ROAD	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:	AT	( ) Delete
Name:	ADLER, DONALD N	
Address:	100 S. SAUNDERS RD.	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:	T	( ) Delete
Name:	DUNN, JR., E. PAUL	
Address:	100 S SAUNDERS RD	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:	AT	( ) Delete
Name:	SELGRAD, MICHAEL A	
Address:	100 S SAUNDERS RD	
City-St-Zip:	LAKE FOREST, IL 60045	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	DUNN, E. PAUL JR	
Address:	100 S SAUNDERS RD	
City-St-Zip:	LAKE FOREST, IL 60045	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL A SELGRAD AT 04/15/2004
Electronic Signature of Signing Officer or Director Date

HYNES, MARY ANN V
100 S SAUNDERS RD SUITE 300
LAKE FOREST IL 60045