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PROFIT
CORPORATION™
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90111 013 ***150.00

DOCUMENT # P94000077868

1. Corporation Name

MIG MANAGEMENT SERVICES OF ILLINOIS, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1994

4. FEI Number
65-0530846

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name JANE M. STEINER
82 Street Address (P.O. Box Number is Not Acceptable)
250 AUSTRALIAN AVE., STE 400
83
84 City WEST PALM BEACH FL 85 Zip Code 33401

9. Name and Address of Current Registered Agent

PATRIE, SHARON
250 S. AUSTRALIAN AVE.
STE 400
WEST PALM BEACH FL 33401

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 of 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 BY: JANE M. STEINER JANE M. STEINER Registered Agent 4/20/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
V	POWERS, DANIEL L	250 AUSTRALIAN AVE. S., SUITE 400	WEST PALM BEACH FL	<input type="checkbox"/>
D	WRIGHT, LARRY E	250 AUSTRALIAN AVE. S., SUITE 400	WEST PALM BEACH FL 33401	<input type="checkbox"/>
D	COTE, JAMES A	1990 N. CALIFORNIA BLVD., SUITE 640	WALNUT CREEK CA 94596	<input type="checkbox"/>
P	VOGT, LOUIS E.	250 S. AUSTRALIAN AVE. STE 400	WEST PALM BEACH FL	<input type="checkbox"/>
VTS	GUTIN, KATHLEEN L.	250 S. AUSTRALIAN AVE. STE 400	WEST PALM BEACH FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D R	WRIGHT, LARRY E.	250 AUSTRALIAN AVE, STE 400	WEST PALM BEACH FL 33401	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	COTE, JAMES A.	2175 N CALIFORNIA BLVD., STE. 800	WALNUT CREEK, CA 94596	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 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, up on an attachment with an address, with all other like empowered.

SIGNATURE: BY: LARRY E. WRIGHT, Vice Pres. 4/9/99 (561) 820-1300
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (1/98)