

2000 UNIFORM BUSINESS REPORT (UBR)

10F2

DOCUMENT # **PA5000017236**

FILED

00 DEC 26 AM 9:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

700003512387--9

1. Entity Name
NWL, Inc.

Principal Place of Business Mailing Address
3500 Three First National Plaza
Chicago, IL 60602

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

City & State City & State

Zip Country Zip Country

REINSTATEMENT

4. PER Number 36-4006479 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
The Prentice Hall Corporation System
1201 Hays Street 105
Tallahassee, FL 32301

7. Name and Address of New Registered Agent
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 agent, or its name, or both, in the State of Florida.
Laura R. Dunlap as its agent
SIGNATURE *Laura R. Dunlap* DATE 12/22/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐
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	P	☐ Delete	TITLE	V, S, T, D, P	☒ Change ☒ Addition
NAME	Richard A. Ungaretti		NAME	Richard A. Ungaretti	
STREET ADDRESS	3500 Three First National Plaza		STREET ADDRESS	3500 Three First National Plaza	
CITY - ST - ZIP	Chicago, IL 60602		CITY - ST - ZIP	Chicago, IL 60602	
TITLE	V, S, T, D	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	Jack Jester		NAME		
STREET ADDRESS	3500 Three First National Plaza		STREET ADDRESS		
CITY - ST - ZIP	Chicago, IL 60602		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Richard A. Ungaretti* 1221-2000 312 977-4430
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

KE



202

ACCOUNT NO- : 072100000032

REFERENCE : 941992 4307052

AUTHORIZATION :

Patricia Pyjot

COST LIMIT : \$ 758.75

ORDER DATE : December 21, 2000

ORDER TIME : 1:18 PM

ORDER NO. : 941992-005

CUSTOMER NO: 4307052

CUSTOMER: Ms. Lindsay Griffith
Ungaretti & Harris
Three First National Plaza
Suite #3500
Chicago, IL 60602-4283

DOMESTIC FILINGS

NAME: NWL, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS _____

RECEIVED
00 DEC 26 AM 8:59
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA