

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90151 034 ***150.00

DOCUMENT # P96000034497

1. Entity Name

JOSEPH U. MOORE, INC.

Principal Place of Business

**123 N WACKER DR
 CHICAGO IL 60606
 US**

Mailing Address

**P.O. BOX 8264
 CHICAGO IL 60680
 US**

2. Principal Place of Business

200 E RANDOLPH STREET

3. Mailing Address

Suite, Apt. #, etc.

Tax Dept 4th Floor

City & State

CHICAGO, ILLINOIS

City & State

4. FEI Number

36-4083823

Applied For

Not Applicable

Zip

60601

Country

U.S.A.

Zip

60680-8264

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

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

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 office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	WILCOX, TERRY L	
STREET ADDRESS	123 N. WACKER	
CITY-ST-ZIP	CHICAGO IL 60606	
TITLE	T	☐ Delete
NAME	AIGOTTI, DIANNE	
STREET ADDRESS	123 N WACKER DRIVE	
CITY-ST-ZIP	CHICAGO IL 60606	
TITLE	S	☐ Delete
NAME	JESCHKE, ARLENE	
STREET ADDRESS	123 N. WACKER	
CITY-ST-ZIP	CHICAGO IL 60606	
TITLE	VPAS	☐ Delete
NAME	HANNER, JEROME	
STREET ADDRESS	123 N. WACKER	
CITY-ST-ZIP	CHICAGO IL 60606	
TITLE	V	☐ Delete
NAME	BAER, JEROME I	
STREET ADDRESS	123 N. WACKER	
CITY-ST-ZIP	CHICAGO IL 60606	
TITLE	VPAS	☐ Delete
NAME	LESCHE, RONALD	
STREET ADDRESS	123 N. WACKER	
CITY-ST-ZIP	CHICAGO IL 60606	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	TERRY L. WILCOX	
STREET ADDRESS	200 E RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO, ILLINOIS 60601	
TITLE	TREASURER	☒ Change ☐ Addition
NAME	DIANE M. AIGOTTI	
STREET ADDRESS	200 E RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO, ILLINOIS 60601	
TITLE	SECRETARY	☒ Change ☐ Addition
NAME	ARLENE JESCHKE	
STREET ADDRESS	200 E RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO, ILLINOIS 60601	
TITLE	VPAS	☒ Change ☐ Addition
NAME	JEROME HANNER	
STREET ADDRESS	200 E RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO ILLINOIS 60601	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	JEROME I. BAER	
STREET ADDRESS	200 E RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO, ILLINOIS 60601	
TITLE	VPAS	☒ Change ☐ Addition
NAME	RONALD LERSCH	
STREET ADDRESS	200 E. RANDOLPH STREET	
CITY-ST-ZIP	CHICAGO, ILLINOIS 60601	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Requester
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/11/02 312-381-1000

CR2E034 (9/01)