

NEW NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra F. Moynihan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 31 AM 7:45

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # **S86484** (0)

1. Corporation Name

COMMODITY TREND SERVICE, INC.

Principal Place of Business

Mailing Address

1201 US HWY ONE
SUITE 350
N PALM BCH FL 33408
US

520 N DEARBORN ST -
CHICAGO IL 60610-4318

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1991

3a. Date of Last Report

04/06/1994

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 155 North Wacker Drive

4. FEI Number

65-0287614

Applied For

Not Applicable

22 City & State

27 Suite, Apt. #, etc.

Suite 900

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

23 City & State

28 City & State

Chicago, IL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

24

25

29

60606

30

USA

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

B. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALL. FL 32303-6643

81 Name

CT CORPORATION SYSTEM

82 Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

83

84 City

Plantation,

FL

85

33324

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 or 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

[Signature]

5/18/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	KYLE, ROBERT C.
STREET ADDRESS	520 N DEARBORN STREET
CITY, ST, ZIP	CHICAGO IL
TITLE	PD
NAME	BLITZ, DENNIS
STREET ADDRESS	520 N DEARBORN STREET
CITY, ST, ZIP	CHICAGO IL
TITLE	D
NAME	CONSTANT, ANITA
STREET ADDRESS	520 N DEARBORN STREET
CITY, ST, ZIP	CHICAGO IL
TITLE	V
NAME	HONAKER, TIMOTHY R
STREET ADDRESS	520 N DEARBORN STREET
CITY, ST, ZIP	CHICAGO IL
TITLE	S
NAME	COWAN, WILLIAM H.
STREET ADDRESS	180 N. LASALLE STREET
CITY, ST, ZIP	CHICAGO IL
TITLE	AS
NAME	POWNEY, WILLIAM
STREET ADDRESS	520 N DEARBORN STREET
CITY, ST, ZIP	CHICAGO IL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☒ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	155 North Wacker Drive, #900
14 CITY, ST, ZIP	60606
21 TITLE	☒ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	155 North Wacker Drive, #900
24 CITY, ST, ZIP	60606
31 TITLE	☒ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	155 North Wacker Drive, #900
34 CITY, ST, ZIP	60606
41 TITLE	☒ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	155 North Wacker Drive, #900
44 CITY, ST, ZIP	60606
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☒ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	155 North Wacker Drive, #900
64 CITY, ST, ZIP	60606

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. I am an officer or director of the corporation as of the removal or transfer of the registered office or registered agent as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing or on any attachments with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William C. Powney

4/7/95

(312) 836-4400