2001 UNIFORM BUSINESS 🕰 Apr 16, 2001 8:00 am Secretary of State DOCUMENT # _ F98600002211 1. Entity Name WMS INDUSTRIES INC. 04-16-2001 90272 014 ***158.75 Principal Place of Business Mailing Address 2. Principal Place of Business 3. Mailing Address <u>800 S. Northpoint Blyd</u> <u>800 S. Northpoint Blvd.</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Civa State Waukegan Illinois 4. FEI Numbe City & State Waukegan Illinois 36-2814522 Not Applicable Zip 60085 Country Country \$8.75 Additional 60085 5. Certificate of Status Desired ĮΧ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Plantation FL 33324 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable, FILE NOWIN FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 19. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. ☐ Channe ☐ Addition ☐ Celete TITLE TITLE See Attached MALIF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CHY-SI-7P CITY-ST-21P ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CRY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete 1ITLE NAME STREET ADDRESS STREET ADORESS 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)(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, win all other like empowered. Orrin J. Edidin, Exec. VP, Secy. & Genl. Counsel 847-785-3756 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR





WMS INDUSTRIES INC. BOARD OF DIRECTORS

<u>Name</u>

Nicastro, Louis J.

Menell, Norman J.

Bartholomay, William C.

McKenna, William E.

Nicastro, Neil D.

Reich, Harvey

Sheinfeld, Ira S.

Satz, David M. Jr.

More, Donna B

<u>Address</u>

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3326 Sabal Cove

Longboat Key, FL 34228-4157

875 N. Michigan Ave., 20th Fl.

Chicago, IL 60611

912 Oxford Way

Beverly Hills, CA 90210

3401 N. California Ave.

Chicago, IL 60618

15342 Stratheam Dr. Delray Beach, FL 33446

,

551 Fifth Avenue, 23rd Flr. New York, NY 10176-0001

One Gateway Center

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