

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**May 09 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P33363 (3)
1. Corporation Name
RANSBURG CORPORATION



Principal Place of Business: **3600 WEST LAKE AVENUE
GLENVIEW IL 60025**
Mailing Address: **3600 WEST LAKE AVENUE
GLENVIEW IL 60025-1215**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

3. Date Incorporated or Qualified: **03/29/1991**
3a. Date of Last Report: **05/01/1996**
4. FEI Number: **35-0834367**
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	FARRELL, W. J	
STREET ADDRESS	3600 WEST LAKE AVE	
CITY-ST-ZIP	GLENVIEW IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DUNCAN, CHARLES	
STREET ADDRESS	3939 W. 56TH STREET	
CITY-ST-ZIP	INDIANAPOLIS IN	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MCGRATH, ROBERT V	
STREET ADDRESS	3600 WEST LAKE AVENUE	
CITY-ST-ZIP	GLENVIEW IL	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	ROBINSON, MICHAEL J	
STREET ADDRESS	3600 W LAKE AVENUE	
CITY-ST-ZIP	GLENVIEW IL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	STEWART S. HUDNUT	
STREET ADDRESS	3600 W. LAKE AVE.	
CITY-ST-ZIP	GLENVIEW IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BUCKMAN, THOMAS W.	
STREET ADDRESS	3600 W. LAKE AVE.	
CITY-ST-ZIP	GLENVIEW IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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; 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, or is listed in an attachment with an address.

SIGNATURE: Michael J. Robinson, V.P. & Treasurer 4/29/97 847-724-7500

CR2E034 (9/96)