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PLEASE	TYPE OR	HINT C	LEARLY	NIBLACK INK	
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FILING DEADLINE IS: PRIOR TO 07/01/86

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DETHIDAL	TO.		

STATE OF ILLINOIS

CORPORATION

Corporation Department 24 1986 Secretary of State JUN 24 1986 Springlield, IL 82756

FOREIGN CORPORATION ANNUAL REPORT

Telephone (217) 782-7808

1.)

1986 YEAR OF

Secretary of State

INVESTMENT MANAGEMENT CORP.

% MICHAEL E C MOSS

55 E MONROE STE 4100

CHICAGO, IL. 60603-0000

REGISTERED AGENT REGISTERED OFFICE CITY, IL, ZIP CODE

Date Qualified To

3.) Do Business in IL:

if other than above:

CORPORATE NAME

2.) AGENT/OFFICE CHANGES ONLY (see 11h)

D72684

<u>INVESTMENT MANAGEMENT COR</u> Corporation Name

% Michael E. C. Moss

Registered Agent

<u> 175 N. Franklin St., Suite 4</u>00 Registered Office - Street Address

-89 Dire 50 PM

Chicago, Illinois 60606 City, County, IL Zip Code

Federal Employer Identification Number (FEIN)

State or Country of incorporation:

4.) The names and addresses of the officers and directors are: (If officers are directors, so state.)

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
Lloyd Van Antwerpen, Dir.	Prosident	9096 N. Derside D	rive, Milwaukee,	Wisconsin	53217
Paul Van Antwerpen, Dir &		1460 M. SENDE			
Lloyd Van Antwerpen	Treasurer	9096 N. Bays de D	rive, Milwaukee,	Wisconsin	53217
	Director		/	-1::	
	Director				

5.) The type of business actually conducted in Illinois is:

6.) Number of shares authorized and issued (as o) 04/30/86

07/26/1984

Give complete address of principal office in state or country of incorporation,

PAR VALUE **CLASS** SERIES

NUMBER AUTHORIZED

NUMBER ISSUED

369 COMMON

7a.) The amount of paid-in capital as of is:

04/30/86

40,000 *PAID-IN CAPITAL \$ _

*"Paid-in Capital" replaces the terms Stated Capital and Paid-in Surplus. It does not include Retained Earnings.

04/30/86 7b.) The Paid-in Capital as of on record with the Secretary of State is:

> 40 000 TOTAL 'S _

7c.) The prior Illinois Capital on record with the Secretary of State is: 40 000

(The figures in Items 7b & 7c may not be altered.)

ITEM 8 MUST BE SIGNED

81	BV	Zean	Q	The	_
,	-,	(App Authorized C		ignature) if ohanoes tisted	احماا

Under the penalty of perjury and as an authorized officer, t declare that this annual report and, if applicable, the statement of change of registered agent and/or office, pursuant to provisions of the Business Corporation Act, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

Attest

ecretary's or ass't Secretary's Signature

M COBROLL, # 400 UNOFFICIAL COPY 175 N FRANKUN CHICAGO, IL 60606

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County Clarks

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