RE	TU	RN	TO:
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Corporation Department Secretary of State Springfield, IL 16 7 951 Telephone (217) 78217, 08

STATE OF ILLINOIS DOMESTIC CORPORATION ANNUAL REPORT

CORPORATION FILE NO. D 5305-525-7

YEAR OF 1987

MAR 9 5 1987

JIM EDGAR Secretary of State

DAVIS BANCORP, INCORPORATED

% JOHN R DAVIS JR

6160 N CICERO CHICAGO. IL. 60646-doon **062684**

COOK

87160988

CORPORATE NAME REGISTERED AGENT

REGISTERED OFFICE CITY, IL, ZIP CODE

3.) Date Incorporated 14/13/1983

Give complete address of principal office.

Federal Employer Identification Number (FEIN)



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

DAVIS BANCORP, INCORPORAT Corporation Name

Davis Registered Agent

Registered Office - Street Address

City, County, IL Zip Code

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

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
J.R. Davis	President	6160 N. Cicero	Chicago	IL 60646	······································
Laura Davis	Secretary	Same			·
J.R. Davis	Troasurer	Same			
J.R. Davis	Director	Same			
Laura Davis	Director	Same	,	· · · · · · · · · · · · · · · · · · ·	
	Director	J			

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

6.) Number of shares authorized and issued (as of 1/31/87)

CLASS PAR VALUE NUMBER AUTHORIZED NUMBER ISSUED COMMON 100,000

7a.) The amount of pald-in capital as of 01/31/87

7b.) The Paid-in Capital as of 01/71/87 on record with the Secretary of State is:

TOTAL \$_

(The figure in Item 7b may not be altered.)

*PAID-IN CAPITAL \$

""Paid-In Capital" replaces the terms Stated Capital and Paid-In Surplus.

It does not include Retained Earnings.

MUST BE SIGNED

Allest

Any Authoreta Officer's Signature)

es, required if changes listed in 2)

(Title)

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.

8.) By

(Secretar)'s or ass't. Secretary's Signature required only if changes tisted in 2)

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