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FILING DEADLINE IS: PRIOR TO 08/01/89

RETURN TO:

Corporation Department
Secretary of State
Springfield, IL 62756
Telephone (217) 782-7808

STATE OF ILLINOIS
FOREIGN CORPORATION ANNUAL REPORT

CORPORATION
FILE NO.

F 1397-670-8

YEAR OF 1989

1.) CORPORATION NAME: WILLIAMS FURNACE CO.
REGISTERED AGENT: X MELVIN POLLACK
REGISTERED OFFICE: 325 N WELLS STREET
CITY, IL, ZIP CODE: CHICAGO, IL. 60610-4705
8X
080284
COOK

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AGENT/OFFICE CHANGES ONLY (see 11h)

WILLIAMS FURNACE CO.

Corporation Name: JOSEPH J. SUM
Registered Agent: X
325 N. WELLS
Registered Office - Street Address: CHICAGO, COOK, IL 60610
City, County IL Zip Code: DE

3.) Do Business In IL: 08/03/1960
Date Qualified To: AUG 04 1989
Give complete address of principal office in state or country of incorporation, if other than above:

JIM EDGAR
Secretary of State

Federal Employer Identification Number (FEIN) * 952084125

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
BRETT M. AUSTIN Director	President	325 J. WELLS	CHICAGO	IL	60610
JOSEPH J. SUM	Secretary	" "	" "	" "	" "
JOSEPH J. SUM	Treasurer	" "	" "	" "	" "
WILLIAM A. RYAN V.P.	Director	" "	" "	" "	" "
JAMES G. GIBWITZ V.P.	Director	" "	" "	" "	" "

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

6.) Number of shares authorized and issued (as of 05/31/89)

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED
PAR STOCK		1	1000	1,000

7a.) The amount of paid-in capital as of 05/31/89 is:

*PAID-IN CAPITAL \$ 1,000

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

7b.) The Paid-In Capital as of 05/31/89 on record with the Secretary of State is:

TOTAL \$ 1,000

7c.) The prior Illinois Capital on record with the Secretary of State is: 1,000 \$

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

ITEM 8 MUST BE SIGNED

8.) By [Signature] V. PRESIDENT 7/25/89

(Any Authorized Officer's Signature)

(Title)

(Date)

Attest [Signature] SECRETARY 7/25/89

(Secretary or Assistant Secretary's Signature)

(Title)

(Date)

Under the penalty of perjury and as an authorized officer, I 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.

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30 N. LaSalle St. 2500
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Attn: Michelle Morris

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