

1996  
YEAR OF 03/01/94  
File Prior to:

**UNOFFICIAL COPY**

STATE OF ILLINOIS  
DOMESTIC CORPORATION ANNUAL REPORT

CORPORATION  
FILE NO.  
D 5677-884-5

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

1.) CHANGE ONLY REGISTERED AGENT: % Donald H. Kayner  
REGISTERED OFFICE: 953 B. North Plum Grove Rd.  
CITY AND ZIP CODE: Schaumburg IL 60173

COUNTY Cook

2.) CORPORATE NAME, REGISTERED AGENT, REGISTERED OFFICE, CITY, IL, ZIP CODE

MIDWEST CAPITAL MORTGAGE CORPORATION  
% DONALD H KAYNER 033092  
~~949 C N PLUM GROVE RD~~ 953 B N. PLUM GROVE RD  
SCHAUMBURG, IL. 60193

**FILED**

APR 04 1994

COOK

COUNTY

GEORGE H. RYAN  
SECRETARY OF STATE

3a.) State or Country of incorporation: IL 3b.) Date Qualified To Do Business In IL: 03/30/1992

4.) The names and residential addresses of ALL officers & directors MUST be listed here!

OFFICE	NAME	NUMBER & STREET	CITY	STATE	ZIP
President	Larry P. Lewis	1703 W. Waverly Ct.	Arlington Hts.	IL	60004
Secretary	Donald H. Kayner	9323 Hamlin Ave.	Des Plaines	IL	60016
Treasurer	Donald C. Fogel	9301 N. Hamlin	Des Plaines	IL	60016
Director					
Director					
Director					

5.) If 51% or more of the stock is owned by a minority or female, please check appropriate box  Minority Owned  Female Owned

6.) Number of shares authorized and issued (as of 12/31/93):

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED
COMM		None	1000	1000.000

IMPORTANT! Whenever the amount in item 6 or 7 differs from the Secretary of State's records, the enclosed BCA 14 30 must be completed

7a.) The amount of paid-in capital as of 12/31/93 is: \$ 59,000

7b.) The Paid-in Capital on record with the Secretary of State is: \$ 59,000

DEPT-01 RECORDING \$23.50  
140012 TRAN 0328 05/03/94 09:50:00  
47078 BK \*-94-396944  
COOK COUNTY RECORDER

9.) By Donald H. Kayner - Sec. 2/18/94  
(Any Authorized Officer's Signature) (Title) (Date)

RETURN TO:

**ITEM 8 MUST BE SIGNED!**

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

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.

**(PLEASE COMPLETE THE REVERSE SIDE OF THIS REPORT)**

PRESIDENT LARRY P LEWIS 1703 W WAVERLY CT ARLINGTON HEIGHTS 60004

SECRETARY DONALD H KAYNER 9323 HAMLIN AVE DES PLAINES 60016

IF THE ABOVE OFFICERS' NAMES AND ADDRESSES ARE MISSING OR HAVE CHANGED, ENTER ONLY THE ADDITIONS OR CORRECTIONS BELOW.

D 5677-884-5

File No

PRESIDENT  
NAME STREET ADDRESS CITY STATE ZIP CODE

SECRETARY  
NAME STREET ADDRESS CITY STATE ZIP CODE

ENTER FEDERAL EMPLOYER IDENTIFICATION NUMBER IF NOT PRINTED

94336944

2350  
CME