

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90174 039 ***150.00

8019990
 DS

DOCUMENT # 847977

1. Entity Name
REALTY SYSTEMS, INC.

Principal Place of Business C/O JENNIFER USHER 2 N RIVERSIDEPLAZA 800 CHICAGO IL 60606 US	Mailing Address C/O JENNIFER USHER 2 N RIVERSIDEPLAZA 800 CHICAGO IL 60606 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 84-0851461	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC.
3953 WW KELLY ROAD
TALLAHASSEE FL 32311

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPT HENEGHAN JR, THOMAS P TWO NORTH RIVERSIDE PLAZA 800 CHICAGO IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD GREENBERG, ARTHUR 2 N.RIVERSIDE PLAZA CHICAGO IL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP REED, MICHAEL 8101 E-PRENTICE AVENUE # 702 ENGLEWOOD CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP DOUGHERTY, MELISSA 8101 E PRENTICE AVENUE # 702 ENGLEWOOD CO 80111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CROOK, CHUCK 28050 US HIGHWAY 19 NORTH CLEARWATER FL 33761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I 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 report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Jennifer L. Usher* **Jennifer L. Usher, Secretary** 01/16/02 312/279-1400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)