

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000109

FILED
Mar 15, 2011
Secretary of State

Entity Name: TR AVENUES CORP.

Current Principal Place of Business:

191 N. WACKER DRIVE, SUITE 2500
CHICAGO, IL 60606 US

New Principal Place of Business:

Current Mailing Address:

191 N. WACKER DRIVE, SUITE 2500
CHICAGO, IL 60606 US

New Mailing Address:

FEI Number: 36-3908645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: VPAS
Name: HOGAN, LAUREN D
Address: 191 N. WACKER DRIVE, SUITE 2500
City-St-Zip: CHICAGO, IL 60606 US

Title: PSTD
Name: KEANE, BLAISE P
Address: 191 N. WACKER DRIVE, SUITE 2500
City-St-Zip: CHICAGO, IL 60606 US

Title: VPAS
Name: EDELMAN, HOWARD J
Address: 191 N. WACKER DRIVE, SUITE 2500
City-St-Zip: CHICAGO, IL 60606 US

Title: VPAS
Name: KELLY, THOMAS P
Address: 191 N. WACKER DRIVE, SUITE 2500
City-St-Zip: CHICAGO, IL 60606 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS P. KELLY

VP

03/15/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date