2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 11, 2005 8:00 am Secretary of State

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-11-2005 90044 036 ***150.00 **DOCUMENT # G03499** INTERVEST SOUTHERN REAL ESTATE CORPORATION Principal Place of Business Mailing Address 300 NORTH FRANKLIN STREET 2901 BUTTERFIELD ROAD OAK BROOK, IL 60521 TAMPA, FL 33602 2. Principal Place of Business 3. Mailing Address 2901 Butterfield Road Suite, Apt. #, etc Suite, Apt. #, etc. 02022005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Oak Brook, Illinois 59-2230516 Not Applicable Country \$8.75 Additional 60323 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE PD ☐ Delete TITLE ■ Addition MATLIN, ROBERTA S. NAME NAME 2901 BUTTERFIELD RAOD STREET ADDRESS STREET ADDRESS OAK BROOK, IL CITY-ST-ZIP CITY-ST-7IP TITLE VD Delete TITLE ☐ Change ☐ Addition DELROSSO, PATRICIA A NAME 2901 BUTTERFIELD RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OAK BROOK, IL CITY-ST-ZIP TITLE ST Delete TITLE Change ☐ Addition LYNCH, CATHERINE L. NAME NAME STREET ADDRESS 2901 BUTTERFIELD RD. STREET ADDRESS CITY-ST-ZIP OAK BROOK, IL CITY-ST-ZIP ΫD TITLE ---Change --- Addition TITLE ☐ Delete NAME HORALEWSKYJ, ULANA B NAME STREET ADDRESS 2901 BUTTERFIELD ROAD STREET ADDRESS OAK BROOK, IL 60523 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CLTY - ST - 71P CITY-ST-7IP

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SI IG OFFICER OR DIRECTOR