## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 24, 2006 8:00 am Secretary of State

☐ Change

☐ Change

☐ Change

Addition

■ Addition

Addition

1. Entity Nam	MENT # P33028 RN TRUST CORPORATION			02-24-2	006 90013 00	3 ***150	.00
Principal Plac	e of Business	Mailing Address		<u> </u>			
50 SOUTH LASALLE STREET 5 CHICAGO, IL 60675 C		50 SOUTH LASALLE STREET C/O ROSE ELLIS, M-9 CHICAGO, IL 60675 US				N 81811 (1611 FIE	
2. Principal Place of Business 3.		Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02092006 Chg-P	CR2E00	34 (11/05)	
City & State		City & State		4. FEI Number 36-2723087			plied For
Zip	Country	Zip	Country	5. Certificate of Status Des	sired 🔲	\$8.75 Add Fee Require	litional d
	6. Name and Address of Current Re	gistered Agent		7. Name and Address of	New Registered A	gent	
8. The above the obligat	NE ISLAND ROAD ION, FL 33324 named entity submits this statement for the ions of registered agent.	e purpose of changing its re	City egistered office or regis	stered agent, or both, in the State	FL e of Florida. I am f	Zip Code amiliar with,	
SIGNATURE_	Signature, lyped or printed name of registered agent and	title if applicable. (NOTE: I	Registered Agent signature requ	urêd when reinstating)	DATE		<del></del>
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		9. Election Campaign Financing \$5  Trust Fund Contribution.   Add  Add				
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANGES TO	O OFFICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO OSBORN, WILLIAM 50 SOUTH LA SALLE STREET CHICAGO, IL 60675	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ELLIS, ROSE A 50 SOUTH LASALLE STREET CHICAGO, IL 60675	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP	EVP MORRISON, WILLIAM L 50 SOUTH LASALLE STREET CHICAGO, IL 60675	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition

CITY-ST-ZIP CHICAGO, IL 60675

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 inter like empowered.

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

EVP

sherry S. Barrat 50 S. Lasalle Street

CITY-ST-ZIP

CITY-ST-ZIP

changed, or on an au	achingo <del>r with</del> an address, with	ali other like empowered.	
SIGNATURE: _	1000	A. Ellis	2/4/06
· <del>-</del>	SIGNATURE AND TYPED OR PRIM	TED NAME OF SIGNING OFFICER OR DIRECTOR	Date

☐ Delete

Delete

Delete

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

**EVP** 

TOTH, TERRENCE J

CHICAGO, IL 60675

50 S. LASALLE STREET

WADDELL, FREDERICK H

50 SOUTH LA SALLE STREET

**50 S LASALLE STREET** 

CHICAGO, IL

PERO, PERRY R