

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 288814

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: BAYOU MANAGEMENT CO.

## Current Principal Place of Business:

7979 BAYOU CLUB BOULEVARD  
LARGO, FL 33777 US

## New Principal Place of Business:

## Current Mailing Address:

7979 BAYOU CLUB BOULEVARD  
LARGO, FL 33777 US

## New Mailing Address:

222 N LASALLE STREET  
SUITE 800  
CHICAGO, IL 60601 US

FEI Number: 59-1089241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: RUBIN, DAVID M.  
Address: 222 N. LASALLE ST #800  
City-St-Zip: CHICAGO, IL

Title: VP ( ) Delete  
Name: FRANKIEWICZ, THERESA O  
Address: 3600 THAYER CT SUITE 100  
City-St-Zip: AURORA, IL 60504

Title: VD ( ) Delete  
Name: NASSAU, RICHARD J.  
Address: 222 N. LASALLE ST. 1000  
City-St-Zip: CHICAGO, IL 00000,

Title: PD ( ) Delete  
Name: CROWN, WILLIAM H.  
Address: 222 N. LASALLE ST. 1000  
City-St-Zip: CHICAGO, IL 00000,

Title: VD ( ) Delete  
Name: GOODMAN, CHARLES H.  
Address: 222 N. LASALLE ST #2000  
City-St-Zip: CHICAGO, IL 00000,

Title: T ( ) Delete  
Name: COHEN, MEL  
Address: 222 N. LASALLE ST. 1000  
City-St-Zip: CHICAGO, IL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID M RUBIN

S

04/12/2007

Electronic Signature of Signing Officer or Director

Date