

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90139 013 ***150.00

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DOCUMENT # 288814

1. Entity Name
BAYOU MANAGEMENT CO.



Principal Place of Business
**7979 BAYOU CLUB BOULEVARD
LARGO FL 33777
US**

Mailing Address
**7979 BAYOU CLUB BOULEVARD
LARGO FL 33777
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1089241**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVIS, AILEEN S.
100 SO ASHLEY DRIVE
STE 1500
TAMPA FL 33602**

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	S	<input type="checkbox"/> Delete
NAME	RUBIN, DAVID M.	
STREET ADDRESS	222 N. LASALLE ST #800	
CITY-ST-ZIP	CHICAGO IL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	FRANKIEWICZ, THERESA O	
STREET ADDRESS	3600 THAYER CT SUITE 100	
CITY-ST-ZIP	AURORA IL 60504	
TITLE	VD	<input type="checkbox"/> Delete
NAME	NASSAU, RICHARD J.	
STREET ADDRESS	222 N. LASALLE ST. 1000	
CITY-ST-ZIP	CHICAGO, IL 00000	
TITLE	PD	<input type="checkbox"/> Delete
NAME	CROWN, WILLIAM H.	
STREET ADDRESS	222 N. LASALLE ST. 1000	
CITY-ST-ZIP	CHICAGO, IL 00000	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GOODMAN, CHARLES H	
STREET ADDRESS	222 N. LASALLE ST #2000	
CITY-ST-ZIP	CHICAGO, IL 00000	
TITLE	T	<input type="checkbox"/> Delete
NAME	COHEN, MEL	
STREET ADDRESS	222 N. LASALLE ST. 1000	
CITY-ST-ZIP	CHICAGO IL	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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]
as agent for
Bayou Mgt. Co.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/03

847-832-2436
Daytime Phone #

CR2E034 (10/02)