2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000102295

Entity Name: PIERHOUSE CHANNELSIDE, INC.

Current Principal Place of Business:

1801 HERMITAGE BLVD SUITE 100

TALLAHASSEE, FL 32308

Current Mailing Address:

191 N WACKER DRIVE **SUITE 2500**

CHICAGO, IL 60606 US

FEI Number: 46-4757815 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2017

Secretary of State

CC2400879648

Officer/Director Detail:

VT

Title D Title D

SPOOK, STEPHEN A TAYLOR, LAMAR Name Name

Address 1801 HERMITAGE BLVD Address 1801 HERMITAGE BLVD

SUITE 100 SUITE 100

TALLAHASSEE FL 32308 City-State-Zip: City-State-Zip: TALLAHASSEE FL 32308

Title Title

HAZEN, MAUREEN M TOGNARELLI, MAURY R Name Name

1801 HERMITAGE BLVD 191 N WACKER DRIVE, SUITE 2500 Address Address

SUITE 100 City-State-Zip: CHICAGO IL 60606 TALLAHASSEE FL 32308 City-State-Zip:

Title

Title VS Name RANCK, THERESA

MCCARTHY, THOMAS D 191 N WACKER DRIVE, SUITE 2500 Address 191 N WACKER DRIVE, SUITE 2500 Address

City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

Title VAT

Title GRAY, LYNNE M Name

Name CHRISTENSEN, LAWRENCE J Address 1801 HERMITAGE BLVD

191 N WACKER DRIVE, SUITE 2500 Address SUITE 100

TALLAHASSEE FL 32308 City-State-Zip: CHICAGO IL 60606 City-State-Zip:

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SECRETARY

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.

04/25/2017 SIGNATURE: THOMAS D. MCCARTHY VICE PRESIDENT &

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VAS

Name PROCTOR, TOM

1801 HERMITAGE BLVD SUITE 100 Address

City-State-Zip: TALLAHASSEE FL 32308