

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000009236

Entity Name: CATALIST PROPERTIES LLC**Current Principal Place of Business:**180 NORTH STETSON AVE, STE. 3650
CHICAGO, IL 60601**Current Mailing Address:**180 NORTH STETSON AVE, STE. 3650
CHICAGO, IL 60601 US**FEI Number: 83-2019360****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**Title P
Name YOUNG, WILLIAM J
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title SVP, CHIEF INVESTMENT OFFICER
Name HELLWEG, BEJAMIN
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title SVP OPERATIONS
Name FLOREZAK, JOE
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title VP, CONTROLLER
Name ESPER, PATRICK M
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title T
Name WETZEL, MARK L
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title SVP, GERNERAL COUNSEL, S
Name BABB, JONATHAN C
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

Title SVP
Name RITTMANIC, DIANE M
Address 180 NORTH STETSON AVE, STE. 3650

City-State-Zip: CHICAGO IL 60601

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN C BABB**SVP, GENERAL COUNSEL 04/03/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date