

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003588

**Entity Name:** LAFP ORLANDO, INC.**Current Principal Place of Business:**360 E SECOND STREET  
6TH FLOOR  
LOS ANGELES, CA 90012**Current Mailing Address:**191 N WACKER DRIVE  
SUITE 2500  
CHICAGO, IL 60606 US**FEI Number:** 47-1685504**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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DP
Name	PALMER, PAUL
Address	360 E SECOND STREET, 6TH FLOOR
City-State-Zip:	LOS ANGELES CA 90012

Title	DS
Name	LOPEZ, TOM
Address	360 E SECOND STREET, 6TH FLOOR
City-State-Zip:	LOS ANGELES CA 90012

Title	DT
Name	ROGERS, RICK
Address	360 E SECOND STREET, 6TH FLOOR
City-State-Zip:	LOS ANGELES CA 90012

Title	VAS
Name	EDELMAN, HOWARD
Address	191 N WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606

Title	VAS
Name	KELLY, THOMAS P
Address	191 N WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606

Title	VAS
Name	RYAN, COLLEEN
Address	191 N WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606

Title	VAS
Name	PROUD, JAMES
Address	191 N WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606

Title	VAS
Name	REZENTS, PAUL
Address	401 WILSHIRE BLVD, SUITE 1200
City-State-Zip:	SANTA MONICA CA 90401

*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.*

**SIGNATURE:** COLLEEN RYAN**VICE PRESIDENT &  
ASSISTANT SECRETARY****04/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date