

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003983

Entity Name: SNOWBIRDLAND VISTAS, INC.

Current Principal Place of Business:

C/O JO FIGUEROA
TWO NORTH RIVERSIDE PLAZA, STE 800
CHICAGO, IL 60606

Current Mailing Address:

C/O JO FIGUEROA
TWO NORTH RIVERSIDE PLAZA, STE 800
CHICAGO, IL 60606

FEI Number: 36-3967305

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	DVPT
Name	OBUCHOWSKI, SUSAN
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip:	CHICAGO IL 60606
Title	D
Name	ZOELLER, JOHN
Address	TWO N RIVERSIDE PLAZA, SUITE 600
City-State-Zip:	CHICAGO IL 60606

Title	DP
Name	GREENBERG, ARTHUR A
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip:	CHICAGO IL 60606
Title	AVPS
Name	SCHULTZ, GENEVIEVE
Address	TWO NORTH RIVERSIDE PLAZA, SUITE 800
City-State-Zip:	CHICAGO IL 60606

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: GENEVIEVE SCHULTZ

AVPS

05/01/2017

Electronic Signature of Signing Officer/Director Detail

Date