## Mar 04, 1999 8:00 am Secretary of State 03-04-1999 90223 038 \*\*\*158.75

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

DOCUMEN.	Γ#	449	1	7	5
1 Composition Name		TTU	•	•	,

<ol> <li>Corporation</li> </ol>	Name								
TERRA C	OTTA REALTY (FLORIDA), I	NC.							
	4B /	Marilla - Andreas							
Principal Place		Mailing Address							
3703 SOUTH RO		PO BOX 477 CRYSTAL LAKE IL 60003				•			
US		US					NOT WRITE IN TH	IIS SPACE	<del></del> -
						<ol> <li>Date Incorporated or 03/25/1974</li> </ol>	Qualifed		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21 1 (III Cipai ( )	ace of Dualitess	26 3703 South R	Route	31	_	36-0386126	-	<del>  </del>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status I	Desired XX	\$8.75	Additional
22		27				5. Centicate of Status t	Desired ALA	Fee Re	equired
City & State	9	City & State				6. Election Campaign F	inancing	•	May Be
23		28 Crystal Lake,				Trust Fund Contribut	ion	Added 1	to Fees
Zip	Country	Zip 30 60012	Country	<i>(</i>		8. This corporation owe	-		<b>7</b> 7112
24	25	29   31	US			Personal Property Ta 10. Name and Address			<b>X</b> □No
	9. Name and Address of Current	Registered Agent	81	Name		TO, Name and Address	Of Rem Registers	A Agoin	
UNIT	ED STATES CORPORATION COM	IPANY					<u> </u>		
1201	HAYS STREET		82	Street	Addres	ss (P.O. Box Number is N	ot Acceptable)		
SUITI	E 105		83						,
TALL	AHASSEE FL 32301			ļ					
			84	City			F	EL  85  Zip (	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abov	e-named	corpor	ation submits this stateme	ent for the purpose	of changing its	registered
office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was auth	horized by	the corpo	oration	's board of directors. I her	eby accept the ap	pointment as re	gisterea
SIGNATURE	,,	• • • • • • • • • • • • • • • • • • • •							
	Signature, typed or printed name of registered agent			nt signature r	required v	when reinstating)	DATE	AND DIDEOTA	200 111 42
12.	OFFICERS AND		13.			ADDITIONS/CHANGE	S TO OFFICERS	Change	XXAddition
TITLE	DCH CEODOE A III	☐ DELETE	1.1 TITLE			FO/T		C change	ZEZENGGIION
NAME	BERRY, GEORGE A. III		1.2 NAME			son, JohnoC.			
STREET ADDRESS	3703 SOUTH ROUTE 31			TADDRESS		3 South Route			
CITY-ST-ZIP TITLE	CRYSTAL LAKE IL PD	☐ DELETE	1.4 CITY-S 2.1 TITLE	1-ZIP	CLY	<u>stal Lake, IL</u>	00012	Change	Addition
NAME	HAYWARD, THOMAS Z.		2.2 NAME			•			
STREET ADDRESS	3703 SOUTH ROUTE 31			T ADDRESS					İ
CITY-ST-ZIP	CRYSTAL LAKE IL		2. 4 CITY-						
TITLE	VD	☐ DELETE	3.1 TITLE	01 23				☐ Change	☐ Addition
NAME	BERRY, GEORGE A. IV		3 2 NAME						
STREET ADDRESS	3703 SOUTH ROUTE 31		3.3 STREE	TADDRESS					
CITY-ST-ZIP	CRYSTAL LAKE IL		3.4. CITY-	ST-ZIP					
TITLE	VD	☐ DELETE	4.1 TTTLE					Change	☐ Addition
NAME	BERRY, ROBERT F.		4. 2 NAME						
STREET ADDRESS	3703 SOUTH ROUTE 31		4 3 STREE	TADDRESS					
CITY-ST-ZIP	CRYSTAL LAKE IL		4.4 CITY-5	ST-ZIP					
TITLE	SGM	☐ DELETE	5.1 TITLE					☐ Change	Addition :
NAME	MARTINEZ, KATHLEEN M		5.2 NAME						
STREET ADDRESS	3703 SOUTH ROUTE 31			T ADORESS					
CITY-ST-ZIP	CRYSTAL LAKE IL	□ BELETE	5.4 CITY-5 6.1 TITLE	ST-ZIP	<del> </del>			☐ Change	☐ Addition
TITLE	ASD BETTOPEW BIOLIARD A	☐ DELETE	6.1 HILE					□ Change	
NAME !	PETTIGREW, RICHARD A.		1	TADORESS					
STREET ADDRESS	100 CHOPIN PLAZA-S3200		0.3 STREE	י אנטאדפא					

MIAMI FL

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

(815)459-2400