2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 21, 2001 8:00 am Secretary of State **DOCUMENT # 449175** TERRA COTTA REALTY (FLORIDA), INC. 02-21-2001 90007 009 ***158.75 Principal Place of Business Mailing Address 3703 SOUTH ROUTE 31 3703 SOUTH ROUTE 31 CRYSTAL LAKE IL 60012 CRYSTAL LAKE IL 60012 922192 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36-0386126 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition DCH ☐ Delete TITLE TITLE NAME BERRY, GEORGE A. III NAME STREET ADORESS STREET ADDRESS 3703 SOUTH ROUTE 31 CITY-ST-ZIP CITY-ST-ZIP CRYSTAL LAKE IL ☐ Change ☐ Addition Delete TITLE NAME HAYWARD, THOMAS Z. NAME STREET ADDRESS 3703 SOUTH ROUTE 31 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CRYSTAL LAKE IL** ☐ Delete TITLE Change ☐ Addition TITLE NAME BERRY, GEORGE A. IV NAME STREET ADDRESS 3703 SOUTH ROUTE 31 --STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CRYSTAL LAKE IL** TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME BERRY, ROBERT F. NAME STREET ADDRESS STREET ADDRESS 3703 SOUTH ROUTE 31 CITY-ST-ZIP CITY-ST-ZIP CRYSTAL LAKE IL ☐ Change ☐ Addition TITLE SGM ☐ Delete TITLE NAME MARTINEZ, KATHLEEN M STREET ADDRESS STREET ADDRESS 3703 SOUTH ROUTE 31 CITY-ST-ZIP CITY-ST-ZIP **CRYSTAL LAKE IL** ☐ Change VTD ☐ Delete TITLE ☐ Addition TITLE NAME **NELSON, JOHN C** NAME STREET ADDRESS STREET ADDRESS 3703 SOUTH ROUTE 31 CITY-ST-ZIP CITY-ST-ZIP CRYSTAL LAKE IL 60012 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

815-459-2400 02 - 16 - 01SIGNATURE: Daytime Phone # Kathleen M. Martinez