SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP 25 AM 10: 14

DOCUMENT # 829866 (3)

1. Corporation Name

TW Recreational Services, Inc.

500001972715--0
-10/14/96--01026--016
****225.00 ****225.00

Principal Place of Business	Mailing Address
203 E. Main St. Spartanburg, SC 29319	203 E. Main St. Spartanburg, SC 29319

3. Date Incorporated or Qualified: 04/09/1973
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business	2a. Mailing Address
21 900 N. Michigan Avenue	26 900 N. Michigan Avenue
Suite, Apt. #, etc. 22 1200	Suite, Apt. #, etc. 27 1200
City & State 23 Chicago, IL	City & State 28 Chicago, IL
Zip / Country 24 60611 / 25 USA	Zip / Country 29 60611 / 30 USA

4. FEI Number: 13-2735034 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Road
Plantation,FL 3324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D McManus, Stephen H. 203 E. Main St. Spartanburg, SC	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D/V Gary Grottke 900 N. Michigan Avenue Chicago, IL 60611	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Biggs, Ray A. 203 E. Main St. Spartanburg, SC	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	P Andrew N. Todd 14001 E. Iliff, Suite 600 Aurora, Colorado 80014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Duren, Burt C. 203 E. Main St. Spartanburg, SC	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	V/S Chester A. Richardson 900 N. Michigan Avenue Chicago, Illinois 60611	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAW, Samuel H. 203 East Main St. Spartanburg, SC	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	V/T Gary Smith 900 N. Michigan Avenue Chicago, IL 60611	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS Parish, Rhonda J. 203 E. Main St. Spartanburg, SC	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	AV/AS Dean L. Lundell 14001 E. Iliff, Suite 600 Aurora, Colorado 80014	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Schaefer, Donald T. 203 E. Main St. Spartanburg, SC	☒ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	V Edward G. Karl 900 N. Michigan Avenue Chicago, Illinois 60611	☒ Change ☐ Addition

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Chester A. Richardson, Vice President 9/19/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(312) 915-1935
Daytime Phone #