2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2005 8:00 am Secretary of State

DOCUMENT # 835746 1. Entity Name NORLEASE, INC.					03-02-2005 90079 004 ***150.00					
Principal Place of Business %CORPORATE TAX M-11 50 SOUTH LASALLE STREET 50 SOUTH LASALLE STREET %ROSE ELLIS, M-9 CHICAGO, IL 60675 US CHICAGO, IL 60675 US										
2. Principal Place of Business 3. Mailing Address										
Suite, Apt. #, etc.	Suite, Apt. #, etc.	#, etc.			02022005	Chg-P	CR2E034	(10/03)		
City & State	City & State	& State			4. FEI Number 36-27487	'68			pplied For of Applicable	
ZipCountry	Zip	try .		5. Certificate of	Status Desired		8.75 Add e Require			
6. Name and Address of Current	Registered Agent				7. Name and A	dress of New Re	gistered Ag	ent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			Name Street Add	Name Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Cod	e	
 The above named entity submits this statement for the obligations of registered agent. 	r the purpose of changing its	register	ed office or re	egistere	d agent, or both,	in the State of Flor	ida. I am far	nilíar with,	and accept	
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registere	d Agent signature	required w	rhen reinstating)		DATE			
FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees										
10. OFFICERS AND	DIRECTORS	11.			ADDITIONS/CH	IANGES TO OFFIC	CERS AND D	IRECTORS	3 IN 11	
TITLE PD NAME PAPE, J. JAY STREET ADDRESS 50 SOUTH LASALLE STREET CITY-ST-ZIP: CHICAGO, IL	☐ Delete							_ Change	Addition	
TITLE : DS NAME KELLEY, JOHN A STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60675	☐ Delete						[] Change	Addition	
TITLE TD NAME JANOVSKY, BRUCE C STREET ADDRESS 50 S. LASALLE STREET CITY-ST-ZIP CHICAGO, IL	Delete		ET ADDRESS -ST-ZIP		₽ . '	· · · · · · · · · · · · · · · · · · ·	C	Change	Addition	
TITLE VP NAME PARKER, ERIC G. STREET ADDRESS CITY-ST-ZIP CHICAGO, IL	⊠ Delete		ET ADDRESS	50 S	iam B. LaSal		X	Change	Addition	
TITLE V NAME DAVIS, GLENN P STREET ADDRESS CITY-ST-ZIP CHICAGO, IL	☐ Delete						E] Change	☐ Addition	
ITILE D NAME SKLANDER, LEE S STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60675 12. I hereby certify that the information supplied with indicated on this second or supplemental report is	Delete	CITY-	ET ADDRESS ST-ZIP nption stated	d in Sect	tion 119.07(3)(i), I	Florida Statutes. I f	urther certify	Change	Addition formation	

inducated 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNIAD OFFICER