2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE AND TYPED OR PR

SIGNATURE:

anou

ED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 09, 2007 8:00 am Secretary of State **DOCUMENT #835746** 04-09-2007 90081 026 ***150.00 Entity Name NORLEASE, INC. Principal Place of Business Mailing Address **50 SOUTH LASALLE STREET** %CORPORATE TAX M-11 C/O CORPORATE TAK, M-11 50 SOUTH LASALLE STREET CHICAGO, IL. 60603 CHICAGO, IL 60603 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102007 CR2E034 (12/06) Chg-P Applied For City & State City & State 4. FEI Number 36-2748768 Not Applicable Zip Country Zip 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD Change Addition TITLE ☐ Delete TITLE PAPE, J. JAY NAME NAME 50 SOUTH LASALLE STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60603 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME KELLEY, JOHN A STREET ADDRESS 50 SOUTH LASALLE ST STREET ADDRESS CHICAGO, IL 60603 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE JANOVSKY, BRUCE C NAME 50 S. LASALLE STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60603 CITY-ST-ZIP □ Change TITLE Delete TITLE ☐ Addition HENSLEY, WILLIAM B NAME NAME 50 S. LA SALLE ST. STREET ADDRESS STREET ADDRESS CHICAGO, IL 60603 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE DAVIS, GLENN P NAME NAME STREET ADDRESS STREET ADDRESS 50 S LASALLE ST CITY-ST-ZIP CHICAGO, IL 60603 CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE SELANDER, LEE S NAME NAME STREET ADDRESS 50 S LASALLE ST STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60603 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Bruce C. Jonousky

FILED

312-630-6648