

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005050

Entity Name: DRE, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

800 S. MILWAUKEE AVE.  
LIBERTYVILLE, IL 60048

## New Principal Place of Business:

## Current Mailing Address:

800 S. MILWAUKEE AVE.  
LIBERTYVILLE, IL 60048

## New Mailing Address:

FEI Number: 36-3912517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EGIDI, DENNIS  
246 SPRINGLINE DRIVE  
NAPLES, FL 34102 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: EGIDI, DENNIS R  
Address: 15170 W. OAK SPRING RD.  
City-St-Zip: LIBERTYVILLE, IL 60048

Title: VCVP ( ) Delete  
Name: EGIDI, MICHAEL  
Address: 1426 N. ORLEANS, APT. 302  
City-St-Zip: CHICAGO, IL 60610

Title: D ( ) Delete  
Name: WELSH, MICHELLE  
Address: 15 CONTRA COSTA PLACER  
City-St-Zip: HENDERSON, NV 89052

Title: D ( ) Delete  
Name: POLHEMUS, DEBORAH  
Address: 30 FEATHER SOUND DR.  
City-St-Zip: HENDERSON, NV 89052

Title: S ( ) Delete  
Name: KRASNOW, HENRY C  
Address: 500 N. DEARBORN, SECOND FLOOR  
City-St-Zip: CHICAGO, IL 60610

Title: TAS ( ) Delete  
Name: ZINOVIK, PATRICIA L  
Address: 800 S. MILWAUKEE AVE, STE. 170  
City-St-Zip: LIBERTYVILLE, IL 60048

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: EGIDI, DENNIS R  
Address: 15170 W. OAK SPRING RD.  
City-St-Zip: LIBERTYVILLE, IL 60048

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS R. EGIDI

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date