2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001299

Entity Name: TAPPAN ADVISORS, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2110 HARBOUR SIDE DRIVE, #555 2110 HARBOURSIDE DRIVE LONGBOAT KEY, FL 34228

555

LONGBOAT KEY, FL 342284259 US

Current Mailing Address: New Mailing Address:

1540 N. LAKE SHORE DRIVE 1540 N. LAKE SHORE DRIVE CHICAGO, IL 60610 CHICAGO, IL 60610

FEI Number: 36-3146108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAKAL, GLORIA BAKAL, GLORIA 2110 HARBOURSIDE DRIVE, 555 2110 HARBOURSIDE DRIVE

LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 342284259 US

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: 01/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition Name: BAKAL, GLORIA Name: BAKAL, GLORIA

2110 HARBOURSIDE DRIVE, #555 2110 HARBOURSIDE DRIVE, #555 Address: Address:

City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 342284259 US

() Delete DST Title: DST (X) Change () Addition Title:

Name: BAKAL, BARNETT Name: BAKAL, BARNETT

2110 HARBOURSIDE DRIVE, #555 2110 HARBOURSIDE DRIVE, #555 Address: Address: LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 342284259 US City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition

BAKAL, SCOTT J Name: BAKAL, SCOTT J Name:

2 N. LA SALLE STREET 2 N. LA SALLE STREET, #1700 Address: Address: City-St-Zip: CHICAGO, IL 60602 City-St-Zip: CHICAGO, IL 606023801 US

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: BARNETT BAKAL TREA 01/19/2009