2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000442

Entity Name: THE OLD MOUNTAIN COMPANY, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1001 NORTH US HIGHWAY ONE SUITE 205 JUPITER, FL 33477				1001 NORTH US HIGHWAY ONE SUITE 205 JUPITER, FL 33477		
Current Mailing Address:				New Mailing Address:		
1001 NORTH US HIGHWAY ONE SUITE 205 JUPITER, FL 33477				225 WEST WACKER DRIVE SUITE 1500 CHICAGO, IL 60606		
FEI Number:	: 36-3144022	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1200 SOU PLANTATI The above		ND ROAD 4 US	urpose o	of changing i	ts registere	d office or registered agent, or both,
	e of Florida.					
SIGNATUR		ais Cianatura of Domistared Age				Data
Election Car		nic Signature of Registered Ager g Trust Fund Contribution ().	'IL			Date
		- , ,			10/01/11/10	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FIELD V, MAR	CKER DRIVE SUITE 1500		Title: Name: Address: City-St-Zip:	CPD FIELD V, M 225 WEST CHICAGO,	WACKER DRIVE SUITE 1500
Title: Name: Address: City-St-Zip:	D (MOSLEY, DAN 825 EIGHT AVI NEW YORK, N	E		Title: Name: Address: City-St-Zip:	D MOSLEY, E 825 EIGHTH NEW YORK	
Title: Name: Address: City-St-Zip:	DP (PIROVANO, JO 551 FIFTH AVE NEW YORK, N	SUITE 1916		Title: Name: Address: City-St-Zip:		(X) Change()Addition , JOHN A AVE SUITE 1916 (, NY 10176
Title: Name: Address: City-St-Zip:	V (X WALLACE, MIC 551 FIFTH AVE NEW YORK, N	SUITE 1916		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	SVEO, CHRIST	CKER DRIVE SUITE 1500		Title: Name: Address: City-St-Zip:	S SVEC, CHR 225 WEST CHICAGO,	WACKER DRIVE SUITE 1500
Title: Name: Address: City-St-Zip:	SHAPIRO, SÚS	CKER DRIVE SUITE 1500		Title: Name: Address: City-St-Zip:	CT SHAPIRO, S 225 WEST CHICAGO	WACKER DRIVE SUITE 1500

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: CHRISTINE SVEC S 03/25/2009