## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000002643

Title:

Name:

Address:

City-St-Zip:

Entity Name: OFFICETIGER GLOBAL REAL ESTATE SERVICES INC

FILED Apr 06, 2009 Secretary of State

This Name: Of Figure 3208/2 NZ NZ Z 201/N Z 321/N Z 321/N Z 321/N Z				
Current Principal Place of Business:			New Principal Place of Business:	
7000 CENTRAL PARKWAY, SUITE 800 ATLANTA, GA 30328			111 SOUTH WACKER DRIVE CHCIAGO, IL 60606	
Current Mailing Address:			New Mailing Address:	
% RR DON 111 S. WAG CHICAGO,	CKER DRIVE		% RR DONNELLY 111 S. WACKER DRIV CHICAGO, IL 60606	E, LEGAL 38TH FL
FEI Number:	20-2982031	FEI Number Applied For ( ) FEI Nur	nber Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of Cu	rrent Registered Agent:	Name and Address of	New Registered Agent:
1200 SOUT	ORATION SYST TH PINE ISLANI DN, FL 33324			
The above in the State		bmits this statement for the purpose of	of changing its registered	office or registered agent, or both,
SIGNATUR	E:			
	Electronic	Signature of Registered Agent		Date
Election Cam		Signature of Registered Agent  Frust Fund Contribution ( ).		Date
		Trust Fund Contribution ( ).	ADDITIONS/CHANGE	Date S TO OFFICERS AND DIRECTORS:
	paign Financing 1	Trust Fund Contribution ( ).  ORS:  Pelete S		<del></del>
OFFICERS Title: Name: Address:	PAIGN FINANCING TO AND DIRECTO PD ()C JUHASE, THOMA 75 PARK PLACE NEW YORK, NY	Trust Fund Contribution ( ).  ORS: Pelete S 100072161 Pelete LLIAM DR.	Title: Name: Address: City-St-Zip: Title: D Name: MAKI, CHRIS	ES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition  (X) Change ( ) Addition  STINE  WACKER DRIVE
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	PAPARELLA, WILL  Paign Financing 1  AND DIRECTO  PD () D  JUHASE, THOMA  75 PARK PLACE  NEW YORK, NY  D () D  PAPARELLA, WILL  1200 LAKESIDE I  BANNOCKBURN,	Trust Fund Contribution ( ).  ORS: Delete S 100072161 Delete LIAM DR. IL 600151243 Delete DRIVE	Title: Name: Address: City-St-Zip:  Title: D Name: MAKI, CHRIS Address: 111 SOUTH City-St-Zip: CHICAGO, IL	ES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition  (X) Change ( ) Addition  STINE  WACKER DRIVE

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SUZANNE BETTMAN S 04/06/2009

( ) Delete

( ) Change (X) Addition

BETTMAN, SUZANNE

111 SOUTH WACKER DRIVE CHICAGO, IL 60606