

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005418

FILED
Apr 23, 2012
Secretary of State

Entity Name: KIMCO FACILITIES SERVICES CORPORATION

Current Principal Place of Business:

4700 N. OKETO AVE
HARWOOD HEIGHTS, IL 60706

New Principal Place of Business:

Current Mailing Address:

2400 YORKMONT ROAD
C/O TAX DEPARTMENT
CHARLOTTE, NC 28217

New Mailing Address:

FEI Number: 36-2686126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 333242525 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

OFFICERS AND DIRECTORS:

Title: CD
Name: KUTTEH, ROBERT H
Address: 955 CHESTERBROOK BLVD
City-St-Zip: WAYNE, PA 19087

Title: DVPT
Name: GATTI, DANIEL
Address: 955 CHESTERBROOK BLVD
City-St-Zip: WAYNE, PA 19087

Title: P
Name: BARNETT, STEPHEN
Address: 4700 N OKETO AVE
City-St-Zip: HARWOOD HEIGHTS, IL 60706

Title: VPAS
Name: BROWN, C PALMER
Address: 2400 YORKMONT ROAD
City-St-Zip: CHARLOTTE, NC 28217

Title: S
Name: SHISLER, VICTORIA E
Address: 955 CHESTERBROOK BLVD
City-St-Zip: WAYNE, PA 19087

Title: AS
Name: ROSSITCH, RICHARD J
Address: 2400 YORKMONT ROAD
City-St-Zip: CHARLOTTE, NC 28217

I hereby 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 all other like empowered.

SIGNATURE: C PALMER BROWN

VPAS

04/23/2012

Electronic Signature of Signing Officer or Director

_____ Date