

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90152 028 \*\*\*150.00

**DOCUMENT # F93000003199**

1. Entity Name

**CHICAGO TECHNOLOGY SERVICES CORPORATION**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**171 N CLARK ST**

3. Mailing Address  
**171 N CLARK ST**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**ML 08RS**

City & State  
**CHICAGO IL**

City & State  
**CHICAGO IL**

4. FEI Number  
**36-3790654**

Applied For  
Not Applicable

Zip  
**60601-3294**

Country  
**US**

Zip  
**60601-3294**

Country  
**US**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**CT CORPORATION SYSTEM**

Street Address (P.O. Box Number is Not Acceptable)  
**1200 PINE ISLAND RD**

City **PLANTATION** **FL** Zip Code **33324**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
ALAN L. STINSON  
4050 CALLE REAL  
SANTA BARBARA CA 93110**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPS  
FERNANDO VELEZ, JR  
4050 CALLE REAL  
SANTA BARBARA CA 93110**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
MARJORIE NEMZURA  
171 N CLARK ST  
CHICAGO IL 60601**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPD  
ANTHONY J PARK  
4050 CALLE REAL  
SANTA BARBARA CA 93110**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
PATRICK F. STONE  
4050 CALLE REAL  
SANTA BARBARA CA 93110**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPT  
PATRICK G FARENGA  
4050 CALLE REAL  
SANTA BARBARA CA 93110**

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

**SIGNATURE: Marjorie Nemzura**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/23/02**  
Date

**312/223-4552**  
Daytime Phone #

CR2E034B (12/01)