

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # F93000005103

1. Entity Name
OAKBROOK COMMUNITIES, INC.



Principal Place of Business
DCI COMMUNITIES, INC.
1600 E. MAIN ST, STE B
ST. CHARLES, IL 60174

Mailing Address
DCI COMMUNITIES, INC.
1600 E. MAIN ST., STE B
ST. CHARLES, IL 60174



04092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3913865

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

1100000910704 DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

05/07/08-80012-001 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MCARDLE, EDWARD J 5311 CAROLINE HOUSTON, TX 77004 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD WELTY, RODNEY A 1600 E MAIN STREET, STE B SAINT CHARLES, IL 60174 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MCARDLE, DAVID 4051 E MAIN STREET ST. CHARLES, IL 60174 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V DEWHIRST, NED E PO BOX 366879 BONITA SPRINGS, FL 34136 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Rodney A. Welty, Corp Secretary 4-14-08 630 584 6580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #