

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Aug 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000001385 (3)
1. Corporation Name

BSRT Fountain Square Corp.

Principal Place of Business Mailing Address
c/o Banyan Management Corp. Same
150 South Wacker Drive, Suite 2900
Chicago, IL 60606

3. Date Incorporated or Qualified 03/18/94 3a. Date of Last Report 04/18/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	36-3942546	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	☒ \$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.03? Florida Statutes	☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T Corporation System
1200 S. Pine Island Rd.
Plantation FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	11 TITLE	☐ Change ☐ Add
NAME	Levine, Leonard G.	12 NAME	
STREET ADDRESS	150 S. Wacker Dr., #2900	13 STREET ADDRESS	
CITY-STATE-ZIP	Chicago, IL 60606	14 CITY-STATE-ZIP	
TITLE	VPS ☐ DELETE	21 TITLE	☐ Change ☐ Add
NAME	Higgins, Robert G.	22 NAME	
STREET ADDRESS	150 S. Wacker Dr., #2900	23 STREET ADDRESS	
CITY-STATE-ZIP	Chicago, IL 60606	24 CITY-STATE-ZIP	
TITLE	VP ☐ DELETE	31 TITLE	☐ Change ☐ Add
NAME	Schmidt, Jay E.	32 NAME	
STREET ADDRESS	150 S. Wacker Dr., #2900	33 STREET ADDRESS	
CITY-STATE-ZIP	Chicago, IL 60606	34 CITY-STATE-ZIP	
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Add
NAME	See attached Rider	42 NAME	
STREET ADDRESS		43 STREET ADDRESS	700002280177
CITY-STATE-ZIP		44 CITY-STATE-ZIP	-08/28/97--01108--005
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Add
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-STATE-ZIP		54 CITY-STATE-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Add
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	400002280174
CITY-STATE-ZIP		64 CITY-STATE-ZIP	-08/28/97--01108--004

14. I do hereby certify that the information supplied on this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the individual is authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an addendum to an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/25/97

3125538000

RIDER
TO 1997 PROFIT CORPORATION ANNUAL REPORT
BSRT FOUNTAIN SQUARE CORP.
Document # F94000001385 (3)

VP

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AS

Swieca, Christopher J.
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D

Auch, Walter E., Sr.
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D

Gold, Norman M.
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Sotoloff Marvin A.
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