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FILED

May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000001547 (8)

1. Corporation Name

JDI-KISSIMMEE REALTY PARTNERS, INC.

Principal Place of Business

SUITE 700
29 NORTH WACKER DRIVE
CHICAGO IL 60606

Mailing Address

SUITE 700
29 NORTH WACKER DRIVE
CHICAGO IL 60606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/28/1994

4. FEI Number

36-3944417

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 150 S. Wacker Dr.

Suite, Apt. #, etc.

22 2660

City & State

23 Chicago, IL

Zip

24 60606

Country

25

2a. Mailing Address

25 150 S. Wacker Dr.

Suite, Apt. #, etc.

27 2660

City & State

28 Chicago, IL

Zip

29 60606

Country

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

FL

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 as of date of application

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CONNOR, KEVIN
STREET ADDRESS 29 NORTH WACKER DRIVE, SUITE 700
CITY-ST-ZIP CHICAGO IL 60606

☐ DELETE

TITLE VPSD
NAME AEDER, JEFFREY
STREET ADDRESS 29 NORTH WACKER DRIVE, SUITE 700
CITY-ST-ZIP CHICAGO IL 60606

☐ DELETE

TITLE T
NAME CONNOR, KEVIN
STREET ADDRESS 29 NORTH WACKER DRIVE, SUITE 700
CITY-ST-ZIP CHICAGO IL 60606

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME 150 South Wacker Dr.
1.3 STREET ADDRESS #2660
1.4 CITY-ST-ZIP Chicago, IL 60606

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME SAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME SAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with 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 supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4/11/98 212-282-4550

CR2E034 (10/97)