

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

1999 JUN 24 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT

98-99 AR

FLORIDA DEPARTMENT OF REVENUE
KIM R. WARRIOR
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000006137(3)

1. Corporation Name

BUTLER PARTNERS, INC.

Principal Place of Business

Mailing Address

2355 WAUKEGAN ROAD
SUITE A 200
BANNOCKBURN, IL. 60015

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/01/94	
City & State		City & State		5. FEI Number	
Zip		Country		36-3984565	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

REINSTATEMENT 98-99

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip

See Attached

200002918632--5
-06/29/99--01055--012
****900.00 ****900.00

8. Name and Address of Current Registered Agent

The PRENTICE HALL CORPORATION System
1201 HAYS ST. STE. 105
TALLAHASSEE, FL. 32301

9. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State FL Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date 6/22/99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

JERRY M. OGLE
Managing Director and Secretary

6/10/99 847-317-4380
Date Daytime Phone #

CR2E081 (12/98)

②

OFFICERS

<u>Name</u>	<u>Title</u>
Thomas E. Meador	Chairman, President and Chief Executive Officer
Alexander J. Darragh	Senior Vice President
Jayne A. Kosik	Senior Managing Director, Chief Financial Officer, Treasurer and Assistant Secretary
Jerry M. Ogle	Senior Managing Director, General Counsel and Secretary
Mike Becker	Senior Managing Director
Jane P. Cody	Senior Managing Director
Terri Thompson	Managing Director and Assistant Secretary

DIRECTORS

Thomas E. Meador
Jayne A. Kosik

The address of the above Officers and Directors

2355 Waukegan Road - Suite A200
Bannockburn, Illinois 60015