## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000000987

Entity Name: LEISURE FACILITIES, INC., V

FILED Mar 27, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 330 NORTH WABASH AVENUE **SUITE 1400** CHICAGO, IL 60611 **Current Mailing Address: New Mailing Address:** 330 NORTH WABASH AVENUE **SUITE 1400** CHICAGO, IL 60611 US FEI Number: 65-0501454 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition Name: SCHULTE, MARK J Name: 330 NORTH WABASH AVE, STE. 1400 Address: Address: CHICAGO, IL 60611 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition RIJOS, JOHN P Name: Name: RIJOS, JOHN P 330 NORTH WABASH AVE., STE. 1400 330 NORTH WABASH AVE., STE. 1400 Address: Address: CHICAGO, IL 60611 CHICAGO, IL 60611 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition YOUNG, STAN YOUNG, STAN Name: Name: 330 NORTH WABASH AVENUE SUITE 1400 330 NORTH WABASH AVENUE SUITE 1400 Address: Address: City-St-Zip: CHICAGO, IL 60611 City-St-Zip: CHICAGO, IL 60611 Title: ( ) Delete Title: () Change () Addition PASKIN, DEBORAH C Name: Name: Address: 330 NORTH WABASH AVENUE SUITE 1400 Address: City-St-Zip: City-St-Zip: CHICAGO, IL 60611 Title: Title: () Delete VD ( ) Change (X) Addition OHLENDORF, MARK W Name: Name: Address: 6737 W. WASHINGTON STREET, SUITE 2300 Address: City-St-Zip: City-St-Zip: MILWAUKEE, WI 53214 Title: () Delete Title: ( ) Change (X) Addition Name: Name: FERGE, KRISTEN A 6737 W. WASHINGTON STREET, SUITE 2300 Address: Address: City-St-Zip: City-St-Zip: MILWAUKEE, WI 53214

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH C. PASKIN VS 03/27/2006