# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 15, 2005**
**Secretary of State**

DOCUMENT# F95000001681

**Entity Name:** ORIX PINELLAS, INC.

**Current Principal Place of Business:**

100 NORTH RIVERSIDE PLAZA, STE 1400
CHICAGO, IL 60606

**New Principal Place of Business:**

**Current Mailing Address:**

100 NORTH RIVERSIDE PLAZA, STE 1400
CHICAGO, IL 60606

**New Mailing Address:**

**FEI Number: 36-3990144** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete
Name: BROWN, DAVID R
Address: 100 NORTH RIVERSIDE PLAZA, STE 1400
City-St-Zip: CHICAGO, IL 60606

Title: VDST ( ) Delete
Name: PLACK, JEFFREY C
Address: 100 NORTH RIVERSIDE PLAZA, STE 1400
City-St-Zip: CHICAGO, IL

Title: VAST ( ) Delete
Name: HOVANEC, DONNA
Address: 100 N RIVERSIDE PLAZA, SUITE 1400
City-St-Zip: CHICAGO, IL 60606

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change ( ) Addition
Name: STANKO, BARBARA A
Address: 100 NORTH RIVERSIDE PLAZA, STE 1400
City-St-Zip: CHICAGO, IL

Title: SRVP (X) Change ( ) Addition
Name: SCOTT, CRONITSER
Address: 100 N RIVERSIDE PLAZA, SUITE 1400
City-St-Zip: CHICAGO, IL 60606

Title: T ( ) Change (X) Addition
Name: MERZ, CARL
Address: 100 N RIVERSIDE PLAZA, STE 1400
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA A. STANKO SEC 04/15/2005

Electronic Signature of Signing Officer or Director — Date