

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90062 041 \*\*\*150.00

**DOCUMENT # F97000002688**

1. Entity Name  
JONES LANG LASALLE AMERICAS, INC.



Principal Place of Business  
200 EAST RANDOLPH DRIVE  
CHICAGO, IL 60601

Mailing Address  
C/O BARRY LIBKIN  
200 EAST RANDOLPH DRIVE, 72ND FLOOR  
CHICAGO, IL 60601

20009160



02012005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>36-4160760</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSE, MARK 200 EAST RANDOLPH DRIVE CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERTS, PETER C 200 E RANDOLPH DR CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAGAN, ROBERT K 200 E RANDOLPH DR CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HAKE, BRIAN P 200 EAST RANDOLPH DRIVE CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JASIONOWSKI, JAMES S 200 EAST RANDOLPH DRIVE CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REPP, GORDON 200 EAST RANDOLPH DR CHICAGO, IL 60601

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*James S. Jasionowski*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

(312) 228-2778

Date

Daytime Phone #

James S. Jasionowski