.2000.UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9700004155 FILED 1. Entity Name MESIROW STEIN DEVELOPMENT SERVICES, INC. 00 SEP 20 AM 10: 41 SECRETARY OF STATE TALEFRAMISES. FLORIDA Mailing Address Principal Place of Business 350 N. CLARK STREET 350 N. CLARK STREET CHICAGO IL 60610 CHICAGO IL 60610 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-4174734 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code FL 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. SIGNATURE . DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Treasurer/CFO ☐ Change 本 Addition Delete TITLE TITI F Kristie P. Paskvan ZYCK, DONALD J NAME NAME STREET ADDRESS STREET ADDRESS 350 N. Clark St. 350 N. CLARK STREET CITY-ST-ZIP CITY-ST-ZIP Chicago, IL 60610 CHICAGO IL 60610 ☐ Change ☐ Delete TITLE Addition TITLE STEIN, RICHARD A NAME NAME STREET ADDRESS STREET ADDRESS 350 N. CLARK STREET CITY-ST-7IP CITY-ST-ZIP CHICAGO IL 60610 Change ☐ Addition TITLE Delete TITLE HANNENBERG, RUTH C NAME NAME STREET ADDRESS STREET ADDRESS 350 N. CLARK STREET 000003415460-CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60610 10/05/00 - 01095 - 01/9 *#***50 Oddition XX Delete TITI F TITLE ****550.00 NAME NAME HANSON, RICHARD A STREET ADDRESS STREET ADDRESS 350 N. CLARK STREET CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60610 ☐ Addition ☐ Change Delete TITLE TITLE BARRETT, MICHAEL J NAME NAME STREET ADDRESS STREET ADDRESS 350 N. CLARK STREET CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60610 Delete TITLE ☐ Change ☐ Addition TITLE NAME YOUNG, BRUCE J NAME STREET ADDRESS 350 N:CLARK ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60610 13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered. (312) 595-6000 SATURE REOLIBEIT 9-14-00 SIGNATURE: SIGNATURE: SIGNATURE SIGN

Daytime Phone #