2008 FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 30, 2008 8:00 am Secretary of State DOCUMENT # F98000002231 04-30-2008 90162 037 ***150.00 1. Entity Name USI REAL ESTATE BROKERAGE SERVICES INC. Principal Place of Business Mailing Address 281 TRESSER BLVD P.O. BOX 591 2 STAMFORD PLAZA X81 STAMFORD, CT 06901 MILWAUKEE, WI 53209 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04072008 Chq-P CR2E034 (12/06) Applied For City & State City & State 4. FELNumber 06-1342410 Not Applicable Zip Country Zip 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 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 City Zip Code 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, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fee OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 President TITLE Delete TITLE ☐ Change Addition POULOPOULOS, KOSTA NAME NAME Santiago Perez STREET ADDRESS 2215 YORK ROAD, SUITE 300 STREET ADDRESS 507 E. Michigan St. CITY-ST-7IP OAK BROOK, IL 60523 CITY-ST-7IP Milwaukee, WI 53202 TITLE ☐ Delete Change TITLE ☐ Addition OKARMA, JEROME NAME NAME STREET ADDRESS 5757 N GREEN BAY AVE, X-81 STREET ADDRESS Milwaukee, WI 53209 CITY-ST-ZIP MILWAUKEE, IL 53200 CITY-ST-7IP TITLE CEO Delete TITLE Secretary ☐ Chance **X** Addition NAME MCLAUGHLIN, ED NAME Paul Bedborough STREET ADDRESS 281 TRESSER BLVD STREET ADDRESS 507 E. Michigan St. CITY-ST-ZIP STAMFORD, CT 06901 CITY-ST-ZIP Milwaukee, WI 53202 TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHAFFEE, ORISON Y NAME NAME STREET ADDRESS STREET ADDRESS 281 TRESSER BLVD, 2 STAMFORD PLAZA CITY - ST - ZiP STAMFORD, CT 06901 CITY-ST-ZIP TITLE TITLE Delete ☐ Change 🖵 Addition **VP** WESTLEY, NICHOLAS J NAME NAME Garrett Cannon STREET ADDRESS 2215 YORK ROAD, SUITE 300 STREET ADDRESS 281 Tresser Blvd., 7th F1. CITY-ST-ZIP OAK BROOK, IL 60523 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling doe indicated on this report or supplemental report if the and acquired. ally for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath, that I am an officer or director eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or changed, or on an attachment with

OFFICER OR DIRECTOR

4/11/08

414-524-1200

Daytime Phone #

FILED