

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003425

1. Entity Name

TVO LAKES MANAGER, INC.

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90061 044 ***550.00

Principal Place of Business

70 EAST LAKE STREET, SUITE 600
CHICAGO IL 60601

Mailing Address

70 EAST LAKE STREET, SUITE 600
CHICAGO IL 60601

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

14-2633639

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCS
VANDENBURG, DAVID L
70 EAST LAKE STREET, SUITE 600
CHICAGO IL 60601 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDS
Vandenburg, David
Same ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT
GUMBINER, DANIEL
70 EAST LAKE STREET, SUITE 600
CHICAGO IL 60601 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT Ass'ts
Gumbiner, Daniel
Same ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LUTTHANS, KIM E
1209 ORANGE STREET
WILMINGTON DE 19801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Beltran, Steven
6090 Surety Dr #102
El Paso, TX 79905 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
Bogas, David
6090 Surety Dr #102
El Paso, TX 79905 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

Signature of Agent
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/00

Date

(812)
553-1133 207

Daytime Phone #

CR2E034 (5/00)