

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003425

FILED  
May 22, 2004  
Secretary of State

Entity Name: TVO LAKES MANAGER, INC.

## Current Principal Place of Business:

70 EAST LAKE STREET, SUITE 600  
CHICAGO, IL 60601

## New Principal Place of Business:

6090 SURETY DRIVE  
SUITE 102  
EL PASO, TX 79905

## Current Mailing Address:

70 EAST LAKE STREET, SUITE 600  
CHICAGO, IL 60601

## New Mailing Address:

6090 SURETY DRIVE  
SUITE 102  
EL PASO, TX 79905

FEI Number: 74-2633639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES 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: VANDENBURG, DAVID L  
Address: 70 EAST LAKE STREET, SUITE 600  
City-St-Zip: CHICAGO, IL 60601

Title: TV ( ) Delete  
Name: GARRETT, CHARLES  
Address: 6090 SURETY DR, SUITE 102  
City-St-Zip: EL PASO, TX 79905

Title: D ( ) Delete  
Name: LUTTHANS, KIM E  
Address: 1209 ORANGE STREET  
City-St-Zip: WILMINGTON, DE 19801

Title: SV ( ) Delete  
Name: BOGAS, DAVID  
Address: 6090 SURETY DR, SUITE 102  
City-St-Zip: EL PASO, TX 79905

Title: V ( ) Delete  
Name: BELTRAN, STEPHEN  
Address: 6090 SURETY DR, SUITE 102  
City-St-Zip: EL PASO, TX 79905

Title: AS (X) Delete  
Name: CHARNAS, CHERYL  
Address: 70 E LAKE ST, SUITE 600  
City-St-Zip: CHICAGO, IL 60601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: DAVID BOGAS

SV

05/22/2004

Electronic Signature of Signing Officer or Director

Date