

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90013 004 ***150.00

DOCUMENT # F99000003927

1. Entity Name

NES PARTNERS, INC.



Principal Place of Business

8601 GULF FREEWAY
HOUSTON TX 77017

Mailing Address

1603 ORRINGTON AVENUE
SUITE 1600
EVANSTON IL 60201

2. Principal Place of Business

8770 W. Bryn Mawr
Suite, Apt. #, etc.
4th Floor

3. Mailing Address

8770 W. Bryn Mawr
Suite, Apt. #, etc.
4th Floor

City & State

Chicago, IL

City & State

Chicago, IL

Zip

60631

Country

USA

Zip

60631

Country

USA



MOORE

CR2E034 (11/03)

4. FEI Number

76-0522461

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

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. 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, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME GULLION, JOSEPH
STREET ADDRESS 1603 ORRINGTON AVE.
CITY-ST-ZIP EVANSTON IL 60201 ☒ Delete

TITLE VC
NAME RODGERS, KEVIN P
STREET ADDRESS 1603 ORRINGTON AVE.
CITY-ST-ZIP EVANSTON IL 60201 ☒ Delete

TITLE CFO
NAME MILIGAN, MICHAEL D
STREET ADDRESS 1603 ORRINGTON AVE STE 1600
CITY-ST-ZIP EVANSTON IL 60201 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President
NAME Michael D. Milligan
STREET ADDRESS 8770 W. Bryn Mawr
CITY-ST-ZIP Chicago, IL 60631 ☐ Change ☐ Addition

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

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

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

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

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

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:

Michael D. Milligan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/04

Date

(773) 695-3999

Daytime Phone #