

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 30 AM 11:55

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L98000002674**

TULIP GROVE, LLC
C/O MAGGIE MARLING
330 NORTH WABASH AVENUE, SUITE 3300
CHICAGO IL 60611-3608

1a. Principal Place of Business Address

C/O MAGGIE MARLING
330 NORTH WABASH AVENUE, SUI
CHICAGO IL 60611

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11/12/1998

FL

4. FEI Number

☐ Applied For

☐ Not Applicable

58-2429116

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

Zip

Country

Zip

Country

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

F & L CORP.,
200 LAURA STREET
JACKSONVILLE FL 32202

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature Required when not signing)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR

EDMUNSON ORANGE CORP,

330 NORTH WABASH AVENUE, S CHICAGO IL

20000123058242-13
-05/07/99-01127-023
****586.25 ****188.75

11. I do 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

Edmunson Orange Corp
By J. Christian Lawitt
Vice President

4-26-99 (904) 351-0707

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

City/State/Zip