

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90052 020 ***158.75

DOCUMENT # P07000066312					
1. Entity Name PLANTATION CONDOMINIUM RENTAL SERVICES, INC.					
Principal Place of Business 1030 N. CLARK STREET SUITE 300 CHICAGO, IL 60610			Mailing Address 1030 N. CLARK STREET SUITE 300 CHICAGO, IL 60610		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 26-0320129	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351			7. Name and Address of New Registered Agent Name <u>CT Corporation System</u> Street Address (P.O. Box Number is Not Acceptable) <u>1200 South Pine Island Road</u> City <u>Plantation</u> <u>FL</u> Zip Code <u>33324</u>		
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 _____ (NOTE: Registered Agent signature required when remaking) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOULETAS, STEVEN E 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FISH, MICHAEL 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CADDEN, JOHN 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PEACOCK, TRACY 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ZINK, MICHAEL 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DIBENEDETTO, ANTHONY R 1030 N. CLARK STREET #300 CHICAGO, IL 60610	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JAMES SCHWARK 1030 N. Clark Street, Suite 300 Chicago IL 60610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 <u>Anthony R. Dibenedetto Secretary</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date <u>1-31-08</u> Daytime Phone # <u>312-595-4714</u>	