FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT OF CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 01 1997 8:00am Secretary of State

DOC	JMENT	#	P12313

FSC DEVELOPMENT CORP.

Principal Place of Business Mailing Address										
c/o Citibank FSC Development Corp.										
500 West Madison St. c/o Citibank, Legal Dept.										
Chicago, IL 60661 500 West Madison				, 8	Sth Fl.	3. Date Incorporated or Qualified	3a Date of Last	Report		
Chicago, IL			60661			3. Date Incorporated or Qualified 3a. Date of Last Report 11/26/1986 04/19/1996				
2. Principal Place of Business 28. Mailing Address			·			4. FEI Number	<u> </u>	Applied For		
21 26				36-3115604				Not Applicable		
Suite, Apt. #, etc. Surte, Apt			#. etc.			S8 75 Additional				
22 27						5. Certificate of Status Desired L Fee Required				
City & State City & State						6. Election Campaign Financing \$5.00 May Be				
23	28				Trust Fund Contribution Added to Fees					
Zip	Country	Zip	}q	Country		8. This corporation has liability for intangible tax under s 199,032, Florida Statutes ☐ Yes ☒ No				
24	25	29	30			<u> </u>				
	9. Name and Address of Current	registered Agent		81	Name	10. Name and Address of New Re	gistered Agent			
CT CO	RPORATION SYSTEM		ļ							
1200	S. Pine Island Road		J	82	Street Address (P.O. Box Number is Not Acceptable)					
Plantation, FL 33324			ŀ	83						
				84	City		FL 85 Zip	o Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Horida Stat	utes, the ab	DOVE-I	named corpo	pration submits this statement for the p	urpose of changing	its registered		
office or r	registered agent, or both, in the State : am familiar with, and accept the obliga	of Florida. Such change wa:	s authorized	d by t	the corporation	on's board of directors. I hereby accep	of the appointment a	is registered		
SIGNATURE	The same account at the same		Torrad char					í		
SIGNATORE	Signature: Typed or printed name of registered ager	rt and fellouf applicable (N	O't Hegistered	a Agent	enuper arutangis.	d when reinstating)	DATE			
12.	OFFICERS AND		13.		-·	ADDITIONS/CHANGES TO OFFIC				
TITLE	DP	☐ DELETE	1.1 1 1				Change	E L_J Addition		
NAME	Tuck, Louise		1.2 NA		ļ			j		
STREET ADDRESS	500 W. Madison St., Chicago, IL 60661	5th Floor			DIRESS			l l		
CITY-\$1-ZIP TITLE		DELETE	2 1 1 II	1Y - S1 -	ZIF		Change	Addition		
NAME	D	_	22 NA				Change	LIAUditio		
STREET ADDRESS	Gsar, Christopher F				DDRESS					
CITY-ST-ZIP	500 W. Madison St., Chicago, IL 60661	5th Floor		HY SI						
TITLE	DT .	DELETE	31111		- 1		Change	Addition		
NAME	McGort, Nancy		3 2 NA							
STREET ADDRESS	500 W. Madison St.,	6th Floor	33811	REELA	DDRESS					
CITY-ST-ZIP	Chicago, IL 60661		3.4 CI	ITY - S1 -	- 7l ^p					
TITLE	VP	DELETE	4 1 111				☐ Change	Addition		
NAME	Saul, Clarence		4 2 NA	AM.				ĺ		
STREET ADDRESS		5th Floor	43811	RELA	DORESS		1.	1		
CITY-ST-ZIP	500 W. Madison St., Chicago, IL 60661	Jen Floor	4401	1 <u>Y SI</u> -	201					
TITLE	Soci.	DELETE,	5.1.111				Change	Addition		
NAME .	Lock, Dale		5 2 NA				1112	11/20		
STREET ADDRESS	One Sansome Street,				DDRESS		S#12/	1142		
CITY-ST-ZIP	San Francisco, CA	94104		1Y-S!-	7.P			7-(-		
TITLE	AS	[] DELETE	G 1 TIT			30000216	本中 学 ^{anga}	: L Addition		
NAME	Bratton, Ann R.	0.41. 731	6 2 NA		Lucat too	-05/06/970104	2016	[
			1		DDRI SS	***165.00				
CITY-ST-ZIP 14. I do here!	Chicago, IL 60661 by certify that the information supplied	I with this filing does not au		ly SI. exem		in Section 119 07(3)(i), Florida Statute	s. I further certify the	at the		

4. 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 or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Am R Bratten BIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICE Ass'+ Secretary

4-29-97 312/627-