2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

Mar 27, 2002 8:00 am Secretary of State DOCUMENT # P17291 1. Entity Name 03-27-2002 90094 019 ***150.00 BRAUVIN REALTY ADVISORS, INC. Principal Place of Business Mailing Address 30 NORTH LASALLE STREET 30 NORTH LASALLE STREET SUITE 3100 **SUITE 3100** CHICAGO IL 60602 CHICAGO IL 60602 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 36-3486212 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (9/01) ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME BRAULT, JEROME J. STREET ADDRESS STREET ADDRESS 30 N. LASALLE STREET, SUITE 3100 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60602 Addition | TITLE Delete TITLE Channe NAME NAME MURPHY, THOMAS E STREET ADDRESS STREET ADDRESS 30 N. LASALLE STREET, SUITE 3100 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60602 Change - 🔲 Addition TITLE Delete -VPS ---NAMÉ NAME BRAULT, JAMES L. STREET ADDRESS STREET ADDRESS 30 N. LASALLE STREET, SUITE 3100 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60602 Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED

Daytime Phone #