FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P24190** **(1)**

1. Corporation Name
WHITMAN CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
900 N. MICHIGAN AVE., SUITE 2000 CHICAGO IL 60611-1542	900 N. MICHIGAN AVE., SUITE 2000 CHICAGO IL 60611-1542

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/05/1989
3a. Date of Last Report: 07/25/1994

2. Principal Place of Business
21 900 N. Michigan Ave.
Suite, Apt. #, etc
22 Suite 1200
City & State
23 Chicago, IL
Zip 24 60611-1575 Country 25

2a. Mailing Address
26 900 N. Michigan Ave.
Suite, Apt. #, etc
27 Suite 1200
City & State
28 Chicago, IL
Zip 29 60611-1575 Country 30

4. FEI Number: 58-1842202 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (New Registered Agent Signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	AVS	11 TITLE		☐ Change ☐ Addition
NAME	YATES, KEVIN B.	12 NAME		
STREET ADDRESS	900 N. MICHIGAN AVENUE	13 STREET ADDRESS		
CITY ST ZIP	CHICAGO IL	14 CITY ST ZIP	60611-1575	
TITLE	V	21 TITLE	V/T	☐ Change ☒ Addition
NAME	KOGEN, HOWARD	22 NAME		
STREET ADDRESS	900 N. MICHIGAN AVENUE	23 STREET ADDRESS		
CITY ST ZIP	CHICAGO IL	24 CITY ST ZIP	60611-1575	
TITLE	T	31 TITLE	V	☒ Change ☐ Addition
NAME	LOVELETTE, STEPHEN A.	32 NAME		
STREET ADDRESS	900 N. MICHIGAN AVENUE	33 STREET ADDRESS		
CITY ST ZIP	CHICAGO IL	34 CITY ST ZIP	60611-1575	
TITLE	CV	41 TITLE	V	☒ Change ☐ Addition
NAME	MALKIN, JUDD D.	42 NAME		
STREET ADDRESS	900 N. MICHIGAN AVENUE	43 STREET ADDRESS		
CITY ST ZIP	CHICAGO IL	44 CITY ST ZIP	60611-1575	
TITLE	P	51 TITLE	P	☒ Change ☐ Addition
NAME	MILLER, ERNEST M., JR.	52 NAME	James D. Motta	
STREET ADDRESS	900 N. MICHIGAN AVENUE	53 STREET ADDRESS	7900 Glades Road	
CITY ST ZIP	CHICAGO IL	54 CITY ST ZIP	Boca Raton, FL 33434	
TITLE		61 TITLE	D	☐ Change ☒ Addition
NAME		62 NAME	Gary Nickele	
STREET ADDRESS		63 STREET ADDRESS	900 N. Michigan Avenue	
CITY ST ZIP		64 CITY ST ZIP	Chicago, IL 60611-1575	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemental 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: _____ Kevin B. Yates 4-27-95 (312)915-1936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0365572 CP