

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28662

FILED
Jan 06, 2012
Secretary of State

Entity Name: RICONDO & ASSOCIATES, INC.

Current Principal Place of Business:

20 N CLARK ST FL 15
CHICAGO, IL 606024185 US

New Principal Place of Business:

Current Mailing Address:

20 N CLARK ST FL 15
CHICAGO, IL 606024185 US

New Mailing Address:

FEI Number: 36-3663903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICONDO, PETE
6205 BLUE LAGOON DR STE 280
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: FAULHABER, JOSEPH M
Address: 10146 HICKORY VALLEY DRIVE
City-St-Zip: HARRISON, OH 45030

Title: VP
Name: WHEELER, GEOFFREY A
Address: 759 TWILIGHT DRIVE
City-St-Zip: CRESCENT SPRINGS, KY 41017

Title: VP
Name: TREZISE, DOUGLAS R
Address: 6 NORTH WILLE
City-St-Zip: MT PROSPECT, IL 60056

Title: PST
Name: RICONDO RAMON
Address: 25580 WHITE BIRCH LANE
City-St-Zip: WHEATON, IL 60187

Title: VP
Name: WILLIAMS, JOHN
Address: 745 MINNA STREET
City-St-Zip: SAN FRANCISCO, CA 94103

Title: VP
Name: RICONDO, PEDRO
Address: 6205 BLUE LAGOON DRIVE, SUITE 280
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RAMON RICONDO

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date