

DOCUMENT # P34748

1. Entity Name

COM REALTY OF ILLINOIS, INC.**FILED**
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90026 028 ***150.00

| | |
|---|---|
| Principal Place of Business 2700 SANDERS RD PROSPECT HEIGHTS IL 60070 US | Mailing Address ATTN: TAX-2 SOUTH 2700 SANDERS ROAD PROSPECT HEIGHTS IL 60070-2701 US |
|---|---|



DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

| | | | |
|----------------------------------|------------|--------------------------|--------------------------------|
| 4. FEI Number | 36-3497260 | Applied For | Not Applicable |
| 5. Certificate of Status Desired | | <input type="checkbox"/> | \$8.75 Additional Fee Required |

| | |
|--|--|
| 6. Name and Address of Current Registered Agent | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | |

| | |
|--|-------------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | FL Zip Code |

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

| | | | |
|--|---|---|--|
| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P KLUG, L.C. 2700 SANDERS ROAD PROSPECT HEIGHTS IL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition SEE ATTACHED SCHEDULE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FRIEDRICH, D.A. 2700 SANDERS ROAD PROSPECT HEIGHTS IL 60070 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS WINDER, R S 2700 SANDERS RD PROSPECT HEIGHTS IL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS ANGELO, J.M. 2700 SANDERS ROAD PROSPECT HEIGHTS IL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S MORRIS, L. J. 2700 SANDERS ROAD PROSPECT HEIGHTS IL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V DELUCA, M. A. 2700 SANDERS ROAD PROSPECT HEIGHTS IL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH M. ANGELO

Date

2/3/2000 (847) 524-6058

Daytime Phone #

COM REALTY, INC.
Officers & Directors

July 26, 1999

| | |
|---------------------------------|------------------------|
| Director | D. A. Friedrich |
| Director | L. C. Klug |
| President | L. C. Klug |
| Secretary & General Counsel | L. J. Morris |
| Vice President | M. A. DeLuca |
| Vice President | F. R. Schimel |
| Vice President | T. P. Shanley |
| Controller | C. K. Worwa |
| Asst. Vice President (Treasury) | P. J. Morelli |
| Asst. Secretary | M. A. Ainslie |
| Assistant Secretary | J. M. Angelo |
| Assistant Secretary | N. J. Bromley |
| Assistant Secretary | M. J. Genz |
| Assistant Secretary | V. A. Voltz |