

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

FILED

Feb 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000090942 (1)

1. Corporation Name

1314 MARQUETTE AVENUE INC.

Principal Place of Business

1801 HERMITAGE BLVD
SUITE 600
TALLAHASSEE FL 32308
US

Mailing Address

1801 HERMITAGE BLVD
SUITE 600
TALLAHASSEE FL 32308-7703
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

12/13/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

36-3995917

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

SCHOW, HORACE II
1230 BLOUNTSTOWN HIGHWAY
TALLAHASSEE FL 32314

10. Name and Address of New Registered Agent

81 Name

David E. Todd

82 Street Address (P.O. Box Number is Not Acceptable)

1801 Hermitage Blvd.

83

Suite 100

84 City

Tallahassee

FL

85

Zip Code
32308

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

David E. Todd, Assistant General Counsel

1-22-97

(Signature of Registered Agent or Director, if Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	<input type="checkbox"/> DELETE
D	BENNETT, DOUGLAS W	1801 HERMITAGE BLVD	TALLAHASSEE FL	<input type="checkbox"/>
D	MILLER, TODD A	1801 HERMITAGE BLVD	TALLAHASSEE FL	<input type="checkbox"/>
P	EDELMAN, HOWARD J.	180 N LASALLE STREET	CHICAGO IL	<input type="checkbox"/>
VS	NOELL, JOHN	180 N LASALLE STREET	CHICAGO IL	<input type="checkbox"/>
VTAS	SMITH, ROGER E.	180 N LASALLE STREET	CHICAGO IL	<input type="checkbox"/>
VAS	BURDI, THOMAS M	180 N LASALLE STREET	CHICAGO IL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. 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 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:

Douglas W. Bennett, Director

2-3-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Phone #

CR2E034 (9/96)