2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # P95000046456 May 03, 2000 8:00 am Secretary of State 1. Entity Name UTILITIES, INC. OF LONGWOOD 05-03-2000 90010 028 ***150.00 Principal Place of Business Mailing Address 2335 SANDERS RD 200 WEATHERSFIELD AVENUE NORTHBROOK IL 60062-6108 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36-4034620 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RASMUSSEN, DONALD Street Address (P.O. Box Number is Not Acceptable) 200 WEATHERSFIELD AVENUE ALTAMONTE SPRINGS FL 32714 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. 388 1 15 W SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Change ☐ Addition TITLE Delete RASMUSSEN, DONALD NAME NAME STREET ADDRESS 200 WEATHERSFIELD AVENUE STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ALTAMONTE SPRINGS FL CEO ☐ Change ☐ Addition ☐ Delete TITLE CAMAREN, JAMES L NAME 2335 SANDERS RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062 ☐ Addition Change ☐ Delete TITLE SCHUMACHER, LAWRENCE N NAME NAME 2335 SANDERS RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTHBROOK IL 60062 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITI F TITLE DOPUCH, ANDREW N NAME NAME STREET ADDRESS STREET ADDRESS 2335 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062 Change VP TITLE Addition ☐ Delete TITLE WENZ, CARL J NAME NAME 2335 SANDERS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NORTHBROOK IL 60062 Change ☐ Addition TITLE TITLE Delete NAME NAME CARTER, DAVID STREET ADDRESS STREET ADDRESS 2335 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK, IL I hereby certify that the information supplied with this filing foes 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 an other like empowered.

847-498-6440

4/4/2000