'2002 UNIFORM BUSINESS REPORT (UBR)- () 9

May 21, 2002 8:00 am Secretary of State **DOCUMENT #** S64966 1. Entity Name 05-21-2002 90871 017 ***150 00 LAKE HOLDING, INC. Principal Place of Business Mailing Address 200 WEATHERFIELD AVE 2335 SANDERS ROAD Duinian **ALTAMONTE SPRINGS FL 32714** NORTHBROOK IL 60062 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3111756 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOWNDES, JOHN F. Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 32801 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Chairman & CEO Change ☐ Addition CEO. ☐ Delete TITLE TITLE CAMAREN, JAMES NAME NAME 2335 SANDERS RD STREET ADDRESS STREET ADDRESS NORTHBROOK IL 60062 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME DOPUCH, ANDREW STREET ADDRESS STREET ADDRESS 2335 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062 Change ☐ Addition Delete TITI F President & CFO TITLE NAME NAME SCHUMACHER, LAWRENCE STREET ADDRESS STREET ADDRESS 2335 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062 Delete [] Change ☐ Addition **VP** TITLE TITLE NAME NAME WENZ, CARL STREET ADDRESS STREET ADDRESS 2335 SANDERS RD . CITY-ST-ZIP **NORTHBROOK IL 60062** CITY-ST-ZIP [] Change ☐ Addition TITLE Delete TITLE NAME NAME CARTER, DAVID STREET ADDRESS STREET ADDRESS 2335 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062

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.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

RASMUSSEN, DONALD

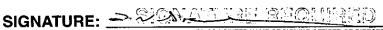
200 WEATHERSFIELD AVE

ALTAMONTE SPRINGS FL

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP



FILED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

[] Change

☐ Addition