2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014279

Entity Name: 8650 VILLA LA JOLLA, INC.

Current Principal Place of Business:

1801 HERMITAGE BLVD. SUITE 100 TALLAHASSEE, FL 32308

Current Mailing Address:

191 N WACKER DRIVE SUITE 2500 CHICAGO, IL 60606 US

FEI Number: 59-3438091

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Officer/Director Detail :

Title	Р	Title	VT
Name	TOGNARELLI, MAURY R	Name	CHRISTENSEN, LAWRENCE J
Address	191 N WACKER DRIVE, SUITE 2500	Address	191 N WACKER DRIVE, SUITE 2500
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	VAS	Title	VAT
Name	HUDGINS, MARK S	Name	GRAY, LYNNE M
Address	191 N. WACKER DRIVE, SUITE 2500	Address	1801 HERMITAGE BLVD. SUITE 100
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	
Title	D	Title	VS
Name	SPOOK, STEPHEN A	Name	MCCARTHY, THOMAS D
Address	1801 HERMITAGE BLVD SUITE 100	Address	191 N. WACKER DRIVE, SUITE 2500
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	CHICAGO IL 60606
Title	D	Title	D
Name	HAZEN, MAUREEN M	Name	TAYLOR, LAMAR
Address	1801 HERMITAGE BLVD. SUITE 100	Address	1801 HERMITAGE BLVD. SUITE 600
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308

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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: MARK S. HUDGINS

VP & ASSISTANT SECRETARY

04/17/2018

Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 17, 2018 Secretary of State CC3376597084

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	VAS
Name	BOLLMAN, TED
Address	1801 HERMITAGE BLVD. SUITE 100
City-State-Zip:	TALLAHASSEE FL 32308