

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000000495

**Entity Name:** COL UTILITY SYSTEMS, L.L.C.**Current Principal Place of Business:**TWO N. RIVERSIDE PLAZA, STE. 800  
CHICAGO, IL 60606**Current Mailing Address:**TWO N. RIVERSIDE PLAZA, STE. 800  
CHICAGO, IL 60606**FEI Number: 74-3030750****Certificate of Status Desired:** No**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

Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name LIQUID ASSETS, L.L.C.  
Address TWO NORTH RIVERSIDE PLAZA STE. 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name JACCARD, WALTER  
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name MARTIN, STANLEY  
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name REGISTER, LESLIE  
Address TWO N. RIVERSIDE PLAZA, STE. 800  
City-State-Zip: CHICAGO IL 60606

Title EXECUTIVE VICE PRESIDENT,  
GENERAL COUNSEL AND  
CORPORATE SECRETARY  
Name ELDERSVELD, DAVID  
Address TWO NORTH RIVERSIDE PLAZA,  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title EXECUTIVE VICE PRESIDENT, CFO  
AND TREASURER  
Name SEAVEY, PAUL  
Address TWO NORTH RIVERSIDE PLAZA,  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title CEO, PRESIDENT  
Name NADER, MARGUERITE  
Address TWO NORTH RIVERSIDE PLAZA,  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title SENIOR VICE PRESIDENT  
Name ALMOND, DALE  
Address TWO N. RIVERSIDE PLAZA, STE. 800  
City-State-Zip: CHICAGO IL 60606

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DAVID ELDERSVELD****EVP, GENERAL COUNSEL 04/18/2019  
AND CORPORATE  
SECRETARY**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title VP  
Name HUFF, PAUL J  
Address TWO N. RIVERSIDE PLAZA, STE. 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name MAUPIN, JEFFREY SCOTT  
Address TWO N. RIVERSIDE PLAZA, STE. 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name BUTLER, EVERRETT  
Address TWO N. RIVERSIDE PLAZA, STE. 800  
City-State-Zip: CHICAGO IL 60606

Title SVP  
Name HATTEL, BRETT  
Address TWO NORTH RIVERSIDE PLAZA,  
SUITE 800  
City-State-Zip: CHICAGO IL 60606