

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000001927

**Entity Name:** HV UTILITY SYSTEMS, L.L.C.

**Current Principal Place of Business:**

TWO NORTH RIVERSIDE PLAZA, SUITE 800  
CHICAGO, IL 60606

**Current Mailing Address:**

TWO NORTH RIVERSIDE PLAZA, SUITE 800  
CHICAGO, IL 60606

**FEI Number: 81-0562101**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

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

**FILED**  
**Mar 23, 2023**  
**Secretary of State**  
**3655427496CC**

*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 VP  
Name GREGORY, JOHN  
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 BUNCE , RONALD  
Address TWO NORTH RIVERSIDE PLAZA,  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

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

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

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

**Continues on page 2**

*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, CHIEF LEGAL  
OFFICER AND  
CORPORATE  
SECRETARY**

**03/23/2023**

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

Title VP  
Name EVERRETT BUTLER II , DONALD  
Address TWO NORTH RIVERSIDE PLAZA, SUITE 800  
City-State-Zip: CHICAGO IL 60606

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

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