### 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006475

Entity Name: ROUTE 46 MANAGEMENT ASSOCIATES CORP.

**FILED** Apr 26, 2021 **Secretary of State** 0716935856CC

## **Current Principal Place of Business:**

150 N. RIVERSIDE PLAZA 14TH FLOOR, LEGAL DEPT. CHICAGO, IL 60606

# **Current Mailing Address:**

150 N. RIVERSIDE PLAZA 14TH FLOOR, LEGAL DEPT. CHICAGO, IL 60606 US

FEI Number: 16-1688983 Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

### Officer/Director Detail:

Title	DIRECTOR, PRESIDENT	Title	VP, TREASURER
Name	HOPLAMAZIAN, MARK S.	Name	O'BRYAN, BRADLEY
Address	150 N. RIVERSIDE PLAZA	Address	150 N. RIVERSIDE PLAZA
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606

Title DIRECTOR, VP Title VP - GLOBAL TAX Name SANTIAGO, SUSAN Name RILEY, JANET

150 N. RIVERSIDE PLAZA Address 150 N. RIVERSIDE PLAZA Address 14TH FLOOR, LEGAL DEPT.

City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

Title VP, SECRETARY Title ASST. SECRETARY Name EGAN, MARGARET

Name PADILLA, ANALISA Address 150 N. RIVERSIDE PLAZA 150 N. RIVERSIDE PLAZA Address 14TH FLOOR, LEGAL DEPT.

14TH FLOOR, LEGAL DEPT. City-State-Zip: CHICAGO IL 60606

City-State-Zip: CHICAGO IL 60606

Title ASST. SECRETARY VΡ Title

Name URBANSKI, CHRISTINA Name GRADY, TRICIA

Address 150 N. RIVERSIDE PLAZA 150 N. RIVERSIDE PLAZA Address 14TH FLOOR, LEGAL DEPT.

14TH FLOOR, LEGAL DEPT.

City-State-Zip: CHICAGO IL 60606 City-State-Zip: CHICAGO IL 60606

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: CHRISTINA URBANSKI

ASSISTANT SECRETARY

04/26/2021