

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000002333

Entity Name: JONES LANG LASALLE CONSTRUCTION COMPANY, INC.**Current Principal Place of Business:**ONE POST OFFICE SQUARE
BOSTON, MA 02109**Current Mailing Address:**ONE POST OFFICE SQUARE
BOSTON, MA 02109 US**FEI Number:** 04-2495202**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 D
Name JASIONOWSKI, JAMES S
Address 200 E. RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title DT
Name FIORANTE, ERNEST
Address 200 E. RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title D
Name ROMENESKO, JOSEPH J
Address 200 E. RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title P
Name BURNS, TODD
Address ONE POST OFFICE SQUARE
City-State-Zip: BOSTON MA

Title VP
Name TORRES, JOSE
Address 200 E. RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title S
Name WERTHEIMER, BERNADETTE
Address 200 E. RANDOLPH
City-State-Zip: CHICAGO IL 60601

Title MANAGER
Name DIGIOVANNI, ANGELA T
Address ONE POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

Title CONTROLLER, VP
Name FLINT, STEPHEN
Address ONE POST OFFICE SQUARE
City-State-Zip: BOSTON MA 02109

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: ANGELA T DIGIOVANNI**MANAGER****02/11/2015**

Electronic Signature of Signing Officer/Director Detail

Date