

2019 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 830151

Entity Name: CALLISONRTKL INC.**Current Principal Place of Business:**901 S. BOND STREET
BALTIMORE, MD 21231**Current Mailing Address:**901 SOUTH BOND ST.
BALTIMORE, MD 21231 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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**Officer/Director Detail :**

Title PRESIDENT / CEO, DIRECTOR
Name FARRELL, KELLY
Address 333 S. HOPE STREET
 C-200
City-State-Zip: LOS ANGELES CA 90071

Title SECRETARY, SVP
Name MILLER, ROBYN L.
Address 333. S. HOPE STREET
 SUITE C-200
City-State-Zip: LOS ANGELES CA 90071

Title CFO, TREASURER, DIRECTOR, EVP
Name PACE, RANDALL S.
Address 901 SOUTH BOND ST.
City-State-Zip: BALTIMORE MD 21231

Title VP
Name FREED, DANIEL
Address 396 ALHAMBRA CIRCLE
 SOUTH TOWER
City-State-Zip: CORAL GABLES FL 33134

Title SENIOR AVP
Name GOODIN, GINA
Address 396 ALHAMBRA CIRCLE
 SOUTH TOWER
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name AVETON, NOEL
Address 1717 PACIFIC AVENUE
City-State-Zip: DALLAS TX 75201

Title DIRECTOR, EVP
Name LUNDGREN, TODD
Address 25 FARRINGDON STREET
 10TH FLOOR
City-State-Zip: LONDON EC4A 4AB

Title DIRECTOR, EVP
Name BILLERBECK, MATTHEW
Address 1420 FIFTH AVE
 SUITE 2400
City-State-Zip: SEATTLE WA 98101

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: ROBYN L. MILLER**SECRETARY****08/19/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date