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May 11, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002033

1. Corporation Name

TRANSAMERICA JOINT VENTURES, INC.

Principal Place of Business	Mailing Address
TWO CONTINENTAL TOWERS 1701 GOLF ROAD SUITE 500 ROLLING MEADOWS IL 60008 US	TWO CONTINENTAL TOWERS 1701 GOLF ROAD SUITE 500 ROLLING MEADOWS IL 60008 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 5595 Trillium Boulevard	26 5595 Trillium Boulevard
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Hoffman Estates, IL	City & State 28 Hoffman Estates, IL
Zip 24 60192 Country 25 U.S.A.	Zip 29 60192 Country 30 U.S.A.

3. Date Incorporated or Qualifed: 04/26/1995

4. FEI Number: 36-4013922 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCEO	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	SCHOEDINGER, JAMES L.		1.2 NAME	
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF RD.		1.3 STREET ADDRESS	5595 Trillium Blvd.
CITY-ST-ZIP	ROLLING MEADOWS IL		1.4 CITY-ST-ZIP	Hoffman Estates, IL 60192
TITLE	AS	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	REYNOLDS, ROSALIE M		2.2 NAME	
STREET ADDRESS	1701 GOLF ROAD		2.3 STREET ADDRESS	5595 Trillium Blvd.
CITY-ST-ZIP	ROLLING MEADOWS IL		2.4 CITY-ST-ZIP	Hoffman Estates, IL 60192
TITLE	SVP	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	TOENISKOETTER, STEVEN J		3.2 NAME	
STREET ADDRESS	1701 GOLF ROAD		3.3 STREET ADDRESS	5595 Trillium Blvd.
CITY-ST-ZIP	ROLLING MEADOWS IL		3.4 CITY-ST-ZIP	Hoffman Estates, IL 60192
TITLE	SVPC	☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	PERRELLI, ROSARIO A		4.2 NAME	
STREET ADDRESS	1701 GOLF ROAD		4.3 STREET ADDRESS	5595 Trillium Blvd.
CITY-ST-ZIP	ROLLING MEADOWS IL		4.4 CITY-ST-ZIP	Hoffman Estates, IL 60192
TITLE	VPT	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	MOHR, JOHN J		5.2 NAME	
STREET ADDRESS	1701 GOLF ROAD		5.3 STREET ADDRESS	5595 Trillium Blvd.
CITY-ST-ZIP	ROLLING MEADOWS IL		5.4 CITY-ST-ZIP	Hoffman Estates, IL 60192
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosalie Reynolds REQUIRED — 4/30/99 — (847) 747-7587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Rosalie M. Reynolds Assistant Secretary

CR2E034 (11/98)

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TRANSAMERICA JOINT VENTURES, INC.

NAME	OFFICE	BUSINESS ADDRESS	
COHAN, Thomas J.	Assistant Secretary	5595 Trillium Boulevard	Hoffman Estates, IL 60192
HENTZ, James H.	Vice President	5595 Trillium Boulevard	Hoffman Estates, IL 60192
LINDBLOM, Eric C.	Vice President	Two Ravinia Drive, Suite 400	Atlanta, GA 30346
MEYER, Eileen M.	Assistant Secretary	5595 Trillium Boulevard	Hoffman Estates, IL 60192
MOHR, John J.	Vice President - Tax	5595 Trillium Boulevard	Hoffman Estates, IL 60192
PEAK, John E.	Vice President	5595 Trillium Boulevard	Hoffman Estates, IL 60192
PERRELLI, Rosario A.	Senior Vice President and Chief Financial Officer	5595 Trillium Boulevard	Hoffman Estates, IL 60192
REYNOLDS, Rosalie M.	Assistant Secretary	5595 Trillium Boulevard	Hoffman Estates, IL 60192
SCHOEDINGER, James L.	**President and Chief Executive Officer**	5595 Trillium Boulevard	Hoffman Estates, IL 60192
TOENISKOETTER, Steven J.	Senior Vice President	5595 Trillium Boulevard	Hoffman Estates, IL 60192
VACANT	Vice President, Secretary and General Counsel		
VACANT	Treasurer's duties preformed by Sr. Vice Pres. Chief Financial Officer		
<u>DIRECTORS</u>			
PERRELLI, Rosario A.		5595 Trillium Boulevard	Hoffman Estates, IL 60192
SCHOEDINGER, James L.		5595 Trillium Boulevard	Hoffman Estates, IL 60192
TOENISKOETTER, Steven J.		5595 Trillium Boulevard	Hoffman Estates, IL 60192
von KAPFF, Marcus A.		5595 Trillium Boulevard	Hoffman Estates, IL 60192

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4/30/99