

1.) CORPORATION NAME:

DUE DATE: **11/30/2011**

HVT, Inc.

SCC ID NO: **F1400045**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 190 SOUTH LASALLE ST
7TH FLOOR

CITY/ST/ZIP: CHICAGO, IL 60603-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

| | | |
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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | PATRICIA M CHILD | |
| TITLE: | PRESIDENT | |
| ADDRESS: | 190 SOUTH LASALLE ST 7TH FLOOR | |
| CITY/ST/ZIP/CO: | CHICAGO, IL 60603- | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | NANCIE J ARVIN | |
| TITLE: | VP/CFO | |
| ADDRESS: | 190 SOUTH LASALLE ST 7TH FLOOR | |
| CITY/ST/ZIP/CO: | CHICAGO, IL 60603- | |

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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | MELISSA ROSAL | |
| TITLE: | VP/S | |
| ADDRESS: | 190 SOUTH LASALLE ST 7TH FLOOR | |
| CITY/ST/ZIP/CO: | CHICAGO, IL 60603- | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | ERIKA FORSHTAY | |
| TITLE: | ASST SECRETARY | |
| ADDRESS: | U.S. BANK NATIONAL ASSOCIATION 190 SOUTH LASALLE STREET, 7TH FLOOR | |
| CITY/ST/ZIP/CO: | CHICAGO, IL 60603- | |

| | | |
|--|---|-----------|
| NAME: JULIA LINIAN TITLE: ASST SECRETARY ADDRESS: U.S. BANK NATIONAL ASSOCIATION 190 SOUTH LASALLE STREET, 7TH FLOOR CITY/ST/ZIP/CO: CHICAGO, IL 60603- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: MARY ANN TURBAK TITLE: ASST SECRETARY ADDRESS: U.S. BANK NATIONAL ASSOCIATION 190 SOUTH LASALLE STREET, 7TH FLOOR CITY/ST/ZIP/CO: CHICAGO, IL 60603- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: BRETT E SCRIBNER TITLE: VICE PRESIDENT ADDRESS: U.S. BANCORP 800 NICOLLET MALL, BC-MN-H19U CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55402- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| NAME: JOHN P KINSELLA TITLE: VICE PRESIDENT ADDRESS: U.S. BANCORP 800 NICOLLET MALL, BC-MN-H19U CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55402- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR | |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. | | |
| /s/ PATRICIA M CHILD | PATRICIA M CHILD, PRESIDENT | 10/4/2011 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. | | |