



## CITY OF NAPERVILLE

### **PETITIONER/APPLICANT** - DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

1. Petitioner: All-In Hospitality Group, LLC  
Address: 1705 Clearwater Ave  
Bloomington, IL 61704
2. Nature of Benefit sought: A minor amendment to Naperville Crossings PUD for exterior stain
3. Nature of Petitioner (select one):

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Joint Venture
<input type="checkbox"/> Land Trust/Trustee	<input checked="" type="checkbox"/> Limited Liability Corporation (LLC)
<input type="checkbox"/> Trust/Trustee	<input type="checkbox"/> Sole Proprietorship
4. If Petitioner is an entity other than described in Section 3, briefly state the nature and characteristics of Petitioner:  
  

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5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):
  - **Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
  - **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
  - **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
  - **Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
  - **Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
  - **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
  - **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

Please see attached list of all LLC ownership

Please see attached Certificate of Good Standing from the State of Illinois as well

as our most recently filed Illinois Annual Report for our Delaware LLC.

6. Name, address and capacity of person making this disclosure on behalf of the Petitioner:

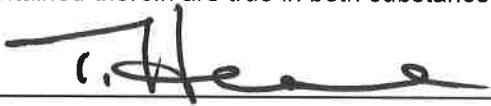
Todd Hovenden, President & CEO, Managing Member

1705 Clearwater Ave., Bloomington, IL 61704

#### VERIFICATION

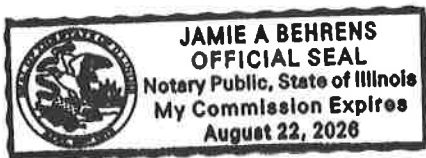
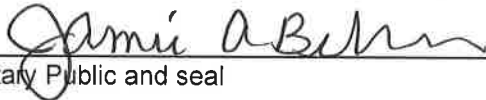
I, Todd Hovenden (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: \_\_\_\_\_



Subscribed and Sworn to before me this 9 day of June, 2025.

Notary Public and seal





## CITY OF NAPERVILLE

### **PROPERTY OWNER** - DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City. **PLEASE SEE ATTACHED PAGE 5 FROM OWNERSHIP**

1. Owner: Naperville Crossings Station, LLC

Address: 1705 Clearwater Ave

11501 Northlake Dr, Cincinnati OH 45249

2. Nature of Benefit sought: ~~A minor amendment to Naperville Crossing Rules and Regulations~~ Exterior stain

3. Nature of Owner (select one):

- |   |   |
|---|---|
| <input type="checkbox"/> Individual         | <input type="checkbox"/> Partnership                                    |
| <input type="checkbox"/> Corporation        | <input type="checkbox"/> Joint Venture                                  |
| <input type="checkbox"/> Land Trust/Trustee | <input checked="" type="checkbox"/> Limited Liability Corporation (LLC) |
| <input type="checkbox"/> Trust/Trustee      | <input type="checkbox"/> Sole Proprietorship                            |

4. If Owner is an entity other than described in Section 3, briefly state the nature and characteristics of Owner:

5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):

- Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
- Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
- Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
- Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
- Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

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6. Name, address and capacity of person making this disclosure on behalf of the Owner:

PLEASE SEE THE OWNERSHIP AUTHORIZATION AND DISCLOSURE LETTER. AS WELL  
AS THE CERTIFICATE OF GOOD STANDING FROM THE ILL SEC OF STATE

VERIFICATION **PLEASE SEE THE NEXT PAGE FOR INFORMATION FOR #6 AND VERIFICATION**

I, \_\_\_\_\_ (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Owner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: \_\_\_\_\_

Subscribed and Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public and seal

**6. Name, address and capacity of person making this disclosure on behalf of the Owner:**

Greg Hausfeld, Senior Vice President and authorized representative of Owner  
Naperville Crossings Station LLC  
c/o Phillips Edison  
11501 Northlake Drive  
Cincinnati, Ohio 45249

**VERIFICATION**

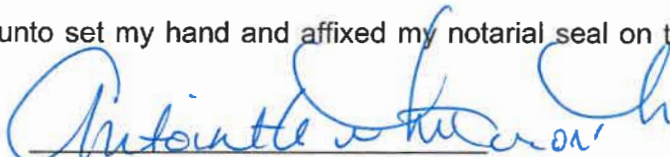
I, Greg Hausfeld, in my capacity as Senior Vice President of Phillips Edison Grocery Center OP GP I LLC, a Delaware limited liability company the General Partner of Phillips Edison Grocery Center Operating Partnership I L.P., a Delaware limited partnership the sole member of NAPERVILLE CROSSINGS STATION LLC, a Delaware limited liability company (collectively "**Owner Group**") being first duly sworn under oath, depose and state that I am making this disclosure on behalf of the Owner Group, that I am duly authorized to make this disclosure on behalf of the Owner Group, that I have read the above and foregoing Disclosure of Beneficiaries and that the statements contained therein are true in both substance and fact.

By:   
Greg Hausfeld, Senior Vice President of the Owner Group

COUNTY OF HAMILTON     )  
  )SS:  
STATE OF OHIO            )

The foregoing instrument was acknowledged before me on July 17, 2025 by Greg Hausfeld, Senior Vice President, of Phillips Edison Grocery Center ORGP I LLC, a Delaware limited liability company the General Partner of Phillips Edison Grocery Center Operating Partnership I L.P., a Delaware limited partnership the sole member of NAPERVILLE CROSSINGS STATION LLC, a Delaware limited liability company on behalf of the companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my notarial seal on the date and year above-mentioned.

  
Notary Public



**ANTOINETTE WHITWORTH**  
Notary Public, State of Ohio  
My Commission Expires  
July 19, 2027