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.

Petitioner: _	Activate Naperville, LLC	,	
	.exington, K1 40507		
Nature of Be	enefit sought:Conditiona	l Use	
Nature of Pe	etitioner (select one):		
a.	Individual	e.	Partnership
b.	Corporation	f.	Joint Venture
C.	Land Trust/Trustee <	g.	Limited Liability Corporation (LLC)
d.	Trust/Trustee	h.	Sole Proprietorship
	Address: 1 L Nature of B Nature of P	Address: 100 W Main St, Ste 600 Lexington, KY 40507 Nature of Benefit sought: Conditional Nature of Petitioner (select one): a. Individual b. Corporation c. Land Trust/Trustee	Address: 100 W Main St, Ste 600 Lexington, KY 40507 Nature of Benefit sought: Conditional Use Nature of Petitioner (select one): a. Individual b. Corporation c. Land Trust/Trustee g.

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

	B2, LLC - PO Box 550, Lexington, KY 40588
	Two Twenty One, LLC - 449 West Sixth St., Lexington, KY 40508
6.	Name, address and capacity of person making this disclosure on behalf of the Petitioner: Jeremiah Sizemore, Managing Member, Activate Naperville, LLC
	100 W Main St, Ste 600, Lexington, KY 40507
I,that I athis distatem	(print name), being first duly sworn under oath, depose and state am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the sents contained therein are true in both substance and fact. The person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the sents contained therein are true in both substance and fact. The person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the sents contained therein are true in both substance and fact. The person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the sents contained therein are true in both substance and fact. The person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the sents contained therein are true in both substance and fact.
Notary	Public and seal COMMISSION # KYNP78499 EXPIRES 08.31.27 OUNTY, KENTULIA

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.

Address:		27 CLARKVIEW ROA					
	$R\Delta$	Address: 1427 CLARKVIEW ROAD, SUITE 500 BALTIMORE MD 21209					
-	טר	RETINIONE NID 21209					
Nature of Ben	efit	sought:					
Nature of Own	ner	(select one):					
	a.	Individual	e.	Partnership			
	b.	Corporation	f.	Joint Venture			
	C.	Land Trust/Trustee	g.	Limited Liability Corporation (LLC)			
	d.	Trust/Trustee	h.	Sole Proprietorship			
If Owner is ar Owner:	n en	itity other than describ	ed in Se	ection 3, briefly state the nature and characteristics of			
	Nature of Own	Nature of Owner a. b. c. d.	b. Corporationc. Land Trust/Trusteed. Trust/Trustee If Owner is an entity other than describ	Nature of Owner (select one): a. Individual e. b. Corporation f. c. Land Trust/Trustee g. d. Trust/Trustee h.			

- 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):
 - a. 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.
 - b. 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.
 - c. **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
 - d. 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.
 - **e. 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.
 - f. **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
 - g. **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.

CR Resident Agent, LLC	1427 CLARKVIEW ROAD, SUITE 500
	BALTIMORE MD 21209

6	Name address and conscitu of names making this displacture on hability of the Ottman
6.	Name, address and capacity of person making this disclosure on behalf of the Owner:
VERIF	ICATION
that I a	_ (print name), being first duly sworn under oath, depose and state am the person making this disclosure on behalf of the Owner, that I am duly authorized to make this ture, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements ned therein are true in both substance and fact.
Signat	ure:
Subsci	ribed and Sworn to before me this day of the
3	Public and seal
ivolary	r ubile and seal
(LESA M WALLS Notary Public-Maryland Baltimore County My Commission Expires October 16, 2026