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File # N56102388

Porm BCA-5.10 NFP-105.10

(Rev. Jan. 1999)

Jesse White
Secretary of State
Department of Business Services
- Springfield; IL-62756
Telephone (217) 782-3647
http://www.sos.state.il.us

STATEMENT OF
CHANGE
OF REGISTERED AGENT
AND/OR REGISTERED
OFFICE



00137911

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Cook County Recorder

23.50



JAN 2 6 2000

IESSE WHITE SECRETARY OF STATE

SUBMIT IN DUPLICATE

This space for use by Secretary of State

Filing Fee

Date

\$5

Approved:

Remit payment-in-check or-money order,payable to "Secretary of State."

Cook

County

Type or print in black ink only.

		See r	everse side	for signature(s).		
1.	CORPORATE NAME:	Lake Mar	y Anne As	sociation, Inc.	45	
2.	STATE OR COUNTRY O	F INCORPOR	ATION:	Illinois	<u> </u>	- -
3.	Name and address of the of the Secretary of State (registered age before change	ent and regi e) :	stered office as the	appear on the records of the offic	е
•	Registered Agent	Gerilanne			Zern	
		First Name		Middle Name	Last Name	
	Registered Office	9600 Reding	Circle			_
		Number	Street	Suite No. (A P.	O. Box alone is not acceptable)	
		Des Plaines		60016	Cook	_
	•	City		ZIP Code	County	
4.)	Name and address of the	registered age	nt and regis	stered office shall be	e (after all changes herein reported,):
/	Registered Agent	Jerry			Капе	_
	r tegistered rigerit	First Name	-	Middle Name	Last Name	
	Registered Office	9604 Reding	Circle			
	negistered Office	Number	Street	Suite No. (A P.	O. Box alone is not acceptable)	_

60016 ZIP Code

Des Plaines

City

UNOFFICIAL COPY

,	
5.	The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
6.	The above change was authorized by: ("X" one box only)
	a. 🔀 By resolution duly adopted by the board of directors. (Note 5)
	b. By action of the registered agent. (Note 6)
NOT	E: When the registered agent changes, the signatures of both president and secretary are required.
7.	(If authorized by the heard of directors, sign here. See Note 5)
who	The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of m affirms, under penalties of parjury, that the facts stated herein are true.
Date	ed 12-1-99 Lake Mary Anne Association, Inc.
Dan	(Month & Day) (Year) (Exact Name of Corporation)
atte	sted by (onne 1, or anita by hilliam (Manika
	(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)
CDN	VIE. MANIER WILLIAM C MANIKA - PRESIDENT
-	(Type or Print Name and Title) (Type or Print Name and Title)
(If c	hange of registered office by registered agent, sign here. See Note 6)
,	The undersigned, under penalties of perjury, affirms that the facts stated herein are true.
	the contract of the contract o
Dot	
Date	(Month & Day) (Year) (Signature of Registered Agent of Record)
Date	
Date	(Month & Day) (Year) (Signature of Registered Agent of Record)
Date	
Date	(Month & Day) (Year) (Signature of Registered Agent of Record) NOTES The registered office may, but need not be the same as the principal office of the corporation. However, the
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