

UNOFFICIAL COPY

0020554645

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2002-05-15 11:21:36
Cook County Recorder 23.00



0020554645

Form LP 1108
(Rev. Jan. 1999)

Filing Fee \$15

SUBMIT IN DUPLICATE!

File #

Assigned by
Secretary of State

FILING DEADLINE IS
PRIOR TO

9/29/01

month, day, year

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope with prepaid postage is included.

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

BIENNIAL RENEWAL REPORT
(Illinois or foreign limited partnership)
(Please type or print clearly)

DO NOT MAKE CHANGES ON THIS FORM. IF CHANGES ARE NECESSARY, AMENDMENT FORM LP 202 (ILLINOIS) OR LP 905 (FOREIGN) AND THE \$25 FEE IS REQUIRED.

- Limited partnership's name: Bradley Operating Limited Partnership
- Address of office where records required by Section 104 (Illinois) or Section 902 (foreign) are kept (P.O. Box alone & c/o are unacceptable): 40 Skokie Boulevard, Suite 600, Northbrook, IL 60062
- File number assigned by the Secretary of State: 5007694
- Federal Employer Identification Number (F.E.I.N.): 04-3306041
- Assumed name, if any: _____
- Admitting name, if any (foreign only): _____
- Registered agent:
First name Kenneth Middle name L. Last name Tucker
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 40 Street Skokie Boulevard Suite# 600
City Northbrook County Cook State IL ZIP Code 60062
- State of jurisdiction: Delaware. If other than Illinois, attach a Certificate of Good Standing or Existence not more than 30 days old. Also give formation date 9/2/93 in that state.

LPR305/09/02:01:5708: 40.00
505IL 5007694 FILED 1108

553462/055 (504) -3

BOX 314

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LPR305/09/02:01:5708: 40.00 MU
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I affirm that any entity serving as a general partner for this limited partnership is in good standing in its home state.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

Renewal report must be signed by a general partner.

Signature _____



Type or print name and title _____

Patrick O'Sullivan Vice President

Name of General Partner, if a corporation or other entity _____

Heritage-Austen Acquisition Inc.

(Signature must be in **BLACK INK** on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

RETURN TO:

Secretary of State
Department of Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8960
<http://www.sos.state.il.us>

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