GENERAL NOT FOR PROFIT CORPORATION ACT

FILE NO. N 5328-369-1

FILE PRIOR TO 12-1-2002 ADD \$3.00 PENALTY FOR LATE FILING

SECRETARY OF STATE OF ILLINOIS



ANNUAL REPORT FILING FEE \$5.00

Eugene "Gene" Moore Fee: \$26.50 Cook County Recorder of Deeds Date: 06/04/2003 09:43 AM Pg: 1 of 1

THE GLEN OF SOUTH BARRINGTON PROPERTY OWNERS' ASSOCIATION 1.) -03-30-00 -7 LAKE ADALYN DR () CHANGES ONLY

SOUTH BARRINGTON IL 60010

REGISTERED AGENT STREET ADDRESS CITY, ZIP CODE COUNTY

Edith Brauer 10 McGlashen Dr. S. Barrington, IL 60010 Cock County

COOK COUNT

- 3.) The above corporation organized under the laws of the state of ILLINOIS, pursuant to the provisions of "The General Not for Profit Corporation Act" of the State of Illinois, hereby makes the following report:
- 4.) THE NAMES AND RESPECTIVE ADDRESSES OF ITS OFFICERS AND DIRECTORS ARE:

NAME	ARE:				
Laura VonDrasek	OFFICE	NUMBER & STREET	CITY	0747-	
Edith Brauer Sandra Ockerlund Joyce Strout Patti Levin	President	Wescott Dr.		STATE	ZIP
	Secretary	10 CoGlashen Dr. 7 Lake Adalyn Dr. 4 Ambrose Ln.	S. Barrington II 60010	0010	
	Treasurer			ΛΛΙΛ	
	Director			0010	
	Director	32 Wescott Dr.	<u> </u>	laton II. 6.	0010
NOTE: List all direct			S. Barrir	gton IL 6	0010
NOTE: List all directors above or list the	m on an additio	nal sheet Illinaia			

NOTE: List all directors above or list them on an additional sheet. Illinois corporations MUST have at least THREE directors.

- 5.) The following is a brief statement of the character of the affairs which the corporation is actually conducting:
- 6.) Is the corporation a CONDOMINIUM Association as established under the Condominium Property Act?

(CHECK ONE)

Is the corporation a COOPERATIVE HOUSING CORPORATION defined in Section 216 of the Internal Revenue Code of 1954?

(CHECK ONE)

is this a HOMEOWNER'S ASSOCIATION which administers A COMMON INTEREST COMMUNITY AS DEFINED IN SUBSECTION (C) No (CHECK ONE)

7.) If a foreign corporation, the address of its principal office in the state of its incorporation is:

(Number and Street)

(State or Country)

(Please read reverse side of this report before signing below)

8.) BY (Authorized Officer's Signature)

ITEM 8 MUST BE SIGNED