FORM NFP 105.10/105.20 (rev. Dec. 2003)
STATEMENT OF CHANGE OF

STATEMENT OF CHANGE OF **REGISTERED AGENT AND/OR**

REGISTERED OFFICE

General Not For Profit Corporation Act

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647 www.cyberdriveillinois.com

FILED

OCT 0 8 2004

Remit payment in the form of a SECRETARY OF STATE check or money order payable to the Secretary of State.



Doc#: 0436447058 Eugene "Gene" Moore Fee: \$26.00 Cook County Recorder of Deeds Date: 12/29/2004 09:52 AM Pg: 1 of 2

	File # N522(5-4771	Filing Fee: \$5.00	Approved:	12h
	Su'Lmit in duplicate — Type or Print clearly in bla	ack ink	o not write above this line-		——·
1.	. CORPORATE NAME CALLINET CHATEAL	V CONDEMIL	vium Asso	SCIATI	<u>0~0</u>
2.	STATE OR COUNTRY OF INCORPORATION:	J-L		· · · · · · · · · · · · · · · · · · ·	
3.	. Name and address of the registered agent and register of the Secretary of State (before change):	ed office as they	appear on the reco	rds of the o	office
	Registered Agent DIAdo L		Make	۲Ÿ	
	Registered Office	iddle Name KoA-D		Name	
	Number Street	Suite No. (A P.O.	. Box alone is not ac	ceptable)	
		7IP Code	Co	ounty	
4.	Name and address of the registered agent and registered critice shall be (after all changes herein reported):				
	Registered Agent DIANA	20	Mok	(AV	100).
	Registered Office Shape Mi	iddle Namo	Last	Name	
	Nymber Street	Suite No. (A P.O	Box alone is not ac	1/	do
	•	ZIP Code		unty	<u> </u>
5.	The address of the registered office and the address of the will be identical.	e business office c	of the registered age	ent, as char	nged,
6.	The above change was authorized by: ("X" one box only	v))	
	a. By resolution duly adopted by the board of direct		ote 5)		4
	 b.	(No	ote 6)		

SEE REVERSE SIDE FOR SIGNATURES(S).

UNOFFICIAL C

7. (If authorized by the board of directors, sign here. See Note 5)
The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms,
under penalties of perjury, that the facts stated herein are true.
Dated X Alptember 30, 2004 CAlumet CHATEAU CONDONINUM ASSOC
(Month & Day) (Year) (Exact Name of Corporation)
(Any Authorized Officer's Signature)
LABERTHA (RAVION-TROASURER
(Type or Print Name and Title)

(If change 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. Dated (No 1th & Day) (Signature of Registered Agent of Record) (Year) Serie Or Co.

(Type or print name, If the registered agent is a corporation, type or print the name and title of the officer who is signing on its behalf.)

- The registered office may, but need not be the pame as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street or road adolosis; a post office box number alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- Any change of registered agent must be by resolution adopted by the board of pirectors. This statement must then be signed by a duly authorized officer.
- The registered agent may report a change of the registered office of the corporation for which he or she is 6. registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.