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FORM **BCA 5.10/5.20** (rev. Dec. 2003) STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE

Business Corporation Act

to Secretary of State.

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

FILED

MAR 1 - 2006

Remit payment in the form of a check or money order payable

b. \Box Action of the registered agent.



Doc#: 0608650009 Fee: \$26.00

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 03/27/2006 09:02 AM Pg: 1 of 2

			File # <u>593</u>	1-862-4	Filing Fee: \$25 Approved	de
	Submit i	n dv plicate —	—— Type or Print clea	rly in black ink ———	Do not write above this line	·
1.	Corporate Name:	Prairie Villa	ege Healthcare Cer	iter, Inc. (File#: D59	931-862-4)	
2.	State or Country of	of Incorporation	i: liirois			
3.	Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):					
	Registered Agent		Abraham 1	J.	Stern	
	•		First Name	Middle Name	Last Name	
Registered Office 10 S. Wacker Drive, 40th Floor						
		Number	Street	Suite N	lo. (P.O. Box alone is unacceptab	le)
			Chicago	60906	Cook	
	•		City	ZIF Cods	County	
4.	Name and Address of Registered Agent and Registered Office shall be (aner all changes herein reported):					
	Registered Agent		Meyer		Magence	
	. tog.oto.ou / tgont		First Name	Middle Name	Last Name	
	Registered Office	8320 Skoki	ie Boulevard		0,	
		Number	Street	Suite N	lo. (P.O. Box alone in unacceptable	le)
			Skokie	60077	Cook	,
	•		City	ZIP Code	County	
5.	The address of the be identical.	eregistered off	ice and the address of	the business office of	the registered agent, as ch	anged, will
6.			ed by: ("X" one box only by the board of director			

SEE REVERSE FOR SIGNATURE(S).

(Note 6)

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7. If authorized by the board of directors, sign here. See Note 5 below.

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 and correct.

Dated	February 28>	2006	Prairie Village Healthcare Center, Inc.
Dateu	Month & Day	Year	Exact Name of Corporation
<u> </u>			
* <i>/</i>	Any Authorized Officer's Signature		
	Sherwin I. Ray - President		
	Name and Title (type or print)		
If change The under	of registered office by registered a rsigned, under penalties of perjury, aff	igent, si firms tha	gn here. See Note 6 below. t the facts stated herein are true and correct.
Dated			
	Month & Day	Year	Signature of Registered Agent of Record
	´O.		
70-			Name (type or print)
			If Registered Agent is a corporation,
			Name and Title of officer who is signing on its behalf.

NOTES

- 1. The registered office may, but need not he, the same 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 address (P.O. Box alone is unacceptable).
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, 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.
- 5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must be signed by a duly authorized officer.
- 6. The registered agent may report a change of the registered office of the coperation for which he/she is a 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.