UNOFFICIAL COPY

FORM NFP 105.10/105.20 (rev. Dec. 2003) 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 501 S. Second St., Rm. 350 Springfield, IL 62756 217-782-3647 www.cyberdriveillinois.com

be identical.

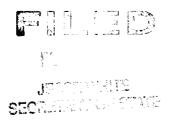
6. The above change was authorized by: (check one box only) a.

Resolution duly adopted by the board of directors.

b. Action of the registered agent.

www.cyberdriveillinois.com

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



Doc#: 0707431134 Fee: \$26.00 Eugene "Gene" Moore

Cook County Recorder of Deeds
Date: 03/15/2007 04:34 PM Pg: 1 of 2

	secretary of State.	\(\)		32 887 21		ing Fee: \$5 Approved:	
		70_				o not write above this line ————	
1.	Corporate Name:	Museum Towa	Residences C	Condominium Associ	ation		
2.	State or Country of	Incorporation	: Illinois				
3.	Name and Address of Registered Agent and Tegistered Office as they appear on the records of the Office of the Secretary of State (before change):						
				Α.		Penland	
	Registered Agent_	Kathleen	First Name		Name	Last Name	
	Registered Office	One North Lat	Salle Street	' (Suite 151		
		Number	Street		Suite No.	(P.O. Box alone is unacceptable)	
			0.,021	60602		Cook	
		Chicago		ZIP code)	County	
		City		2.11 000.10			
4.	Name and Address of Registered Agent and Registered Office after all changes herein are reported:						
	Registered Agent	Kathleen			\	Penland	
			First Nam	e Midd	le Name	Last Name	
	Registered Office	One North LaSalle Street			38th FI		
		Number	Street		Suite No	o. (P.O. Bcx alone is unacceptable)	
		Chicago		60602		Солк	
		City		ZIP code		County	
		٠٠٠,					

SEE REVERSE FOR SIGNATURE(S).

5. The address of the registered office and the address of the business office of the registered agent, as changed, will

(See Note 5 on reverse.) (See Note 6 on reverse.)

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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					
	Month & Day	Year	Exact Name of Corporation		
	Any Authorized Officer's Signature				
***	Name and Title (type or print)		···		
If change The unde	of registered office by registered rsigned, under penalties of perjury, a	agent, si ffirms tha	gn here. (See Note 6 below.) t the facts stated herein are true and correct.		
Dated	/6,2001 Month & Day	Year	Signature of Registered Agent of Record		
	Kathleen A. Penland				

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 be, 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 corporation 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.