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DATE 06-19-07 FEE \$75-
SOSIL FILE NO. C004718
FILED EXPEDITED BY: AF

Form LP 203
January 2005

Doc#: 0719231042 Fee: \$26.00
Eugene "Gene" Moore
Cook County Recorder of Deeds
Date: 07/11/2007 10:39 AM Pg: 1 of 2

Filing Fee: \$25

Submit in duplicate. Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to Secretary of State.
Please do not send cash.

Department of Business Services
Limited Partnership Division
57 Howlett Building
Springfield, IL 62756
217-785-8960
www.cyberdriveillinois.com

Correspondence regarding this filing will be sent to the registered agent of the Limited Partnership unless a self-addressed, stamped envelope is included.

**Illinois Secretary of State
Department of Business Services
Certificate of Cancellation or Termination
of the Certificate of Limited Partnership
(Illinois Limited Partnership)**

Please type or print clearly.

- Limited Partnership name: 110 DEVELOPMENT COMPANY
- File number assigned by Secretary of State: C004718
- Federal Employer Identification Number (F.E.I.N.): 36-3217842
- Reason for filing a Certificate of Cancellation: Limited Partnership is no longer conducting business
- This Certificate of Cancellation is effective on (check one):
 filing date
 a later date, but not more than 60 days subsequent to filing date _____
Date (month, day, year)
- Address, including county, to which the Secretary of State may mail a copy of any process against the Limited Partnership that may be served on him/her (P.O. Box only is unacceptable):
110 West Hubbard Street, Chicago, IL 60610, Cook County

2005

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Form LP 203**Names and Business Addresses of all General Partners**

The undersigned affirms, under penalties of perjury, that the facts stated herein are true. All general partners are required to sign the Certificate of Cancellation.

1.	<i>Thomas H. Baur</i>	2.	
	Signature		Signature
	Thomas H. Baur		
	Name and Title (type or print)		Name and Title (type or print)
	General Partner Name if corporation or other entity		
	110 W. Hubbard St.		
	Street Address		General Partner Name if corporation or other entity
	Chicago, IL 60610		
	City, State, ZIP, County		Street Address
	Signature		City, State, ZIP, County
3.		4.	
	Signature		Signature
	Name and Title (type or print)		Name and Title (type or print)
	General Partner Name if corporation or other entity		General Partner Name if corporation or other entity
	Street Address		Street Address
	City, State, ZIP, County		City, State, ZIP, County

**Signatures must be in black ink on an original document.
Carbon copy, photocopy or rubber stamp signatures
may only be used on conformed copies.**