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.

FILED

MAY 2 1 2007

JESSE WHITE SECRETARY OF STATE



Doc#: 0721950071 Fee: \$26.50 Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 08/07/2007 12:18 PM Pg: 1 of 2

ch	emit payment in the form of a eck or money order payable
O	Secretary of State.
	File # 60504881 Filling Fee: \$5 Approved: 200504881
	———— Submit in deplicate ———— Type or Print clearly in black ink ———— Do not write above this line ————
1.	Corporate Name: ST. Wences law Square Town Homes
2.	State or Country of Incorporation:
_	News and Address of Devictored Anathan Devictored Office on they appear on the records of the Office of the
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 Michelle A. Laiss
	First Name Middle Name Last Name
	Registered Office Number Street Suite No. (P.O. Box alone is unacceptable)
	Chicago 601061 COOK
	City ZIP code County
4.	Name and Address of Registered Agent and Registered Office after all changes herein are reported:
•	
	Registered Agent
	T/
	Number Street CICCO Ave CNICAGO, IL 60646 COOK
	City ZIP code County
=	The address of the registered office and the address of the business office of the registered agent, its changed, will

SEE REVERSE FOR SIGNATURE(S).

(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 .	April 16, 2007 Month & Day	Year ST. W	lences aus Exact Name o	Square f Corboration	Townhone
	Any Authorized Officer's Signature	9			
	Name and Title (type or print)	LESIDENT			

If change of registered office by registered agent, sign here. (See Note 6 below.)

The undersigned, under penalties of perjury, affirms that the facts stated herein are true and correct.

Dated			
	. for th & Day	Year	Signature of Registered Agent of Record
	· O ₄	*****	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 boar 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.

OFFICE