## UNOFFICIAL CO

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

Doc#: 0734534076 Fee: \$26.00 Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 12/11/2007 10:26 AM Pg: 1 of 2

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

	SECRETARY OF STAT	'E JESSE WHI	TE FILED 11/	06/07	
Remit payment in the form of a check or money order payable to the Secretary of State.			CP0891518		
	File # 0510	7-9381	Filing Fee:	\$5.00 Approved: SG	
	Submit in suplicate Type or Print clea	irly in black ink	Do not write abov		
1.	CORPORATE NAME: THE ELIZABETH L. JOKSIMOVIC MEMORIAL FOUNDATION				
2.	STATE OR COUNTRY OF INCORPORATION: ILLINOIS				
3.	Name and address of the registered agent and registered office as they appear on the records of the office of the Secretary of State (before change)				
	Registered Agent STUART	J.		KOHN	
	Registered Office 120 N. LASALLE, SUIT	Middle Name ୮E 3%00		Last Name	
	Number Street CHICAGO, IL City	000(12)	P.O. Box alone is CO(	s not acceptable) DK	
4.	Name and address of the registered agent and reg	ZIP (or,e	h- (-#	County	
	Registered Agent STUART	J.	⊊e (aπer ali chai		
	Registered Office 2 N. LASALLE ST.	Middle Name STE. 1300	O <sub>n</sub>	KOHN Last Name	
	Number Street CHICAGO, IL	Suite No. (A 60602	P.O. Box alone is	not acceptable) COOK	
÷ .	City	ZIP Code		County	
5. ·	The address of the registered office and the address of the business office of the registered agent as changed,				
i	The above change was authorized by: ("X" one box	conly)		0	
k	By resolution duly adopted by the board of co.  By action of the registered agent.	firectors.	(Note 5) (Note 6)		

SEE REVERSE SIDE FOR SIGNATURES(S).

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## **UNOFFICIAL COPY**

(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 (Month & Day) (Year) (Exact Name of Corporation) (Any Authorized Officer's Signature) (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 berein Dated OCTOBER (Mont', & Day) e of Registered Agent of Record) STUART J. KOHN (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

## NOTES

- 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; a post office box number alone is not acceptable.
- A corporation cannot act as its own registered agent.
- 4. 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 continued 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 then 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 or she is 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.