UNOFFICIAL C

FORM NFP 105.10/105.20 (rev. Dec. 2005) E D

STATEMENT OF CHANGE

OF REGISTERED AGENT AND/OR

NOV 1 6 2007

REGISTERED OFFICE

identical.

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

b.
Action of the registered agent. (See Note 6 on back.)

a. 🔀 Resolution duly adopted by the board of directors. (See Note 5 on back.)

General Not For Profit Corporation Act

JESSE WHITE SECRETARY OF STATE

Jesse White, Secretary of State Department of Business Services 501 S. Second St., Rm. 350 Springfield, IL 62756 217-782-3647

www.cyberdriveillinois.com Remit payment in the form of a



Doc#: 0801760042 Fee: \$26.50

Eugene "Gene" Moore

Cook County Recorder of Deeds Date: 01/17/2008 10:03 AM Pg: 1 of 2

ch	eck or money order pay	/able			-		
το	Secretary of State	File :	#N 63	03-104-6	Filing Fee: \$5	Approved:	
	• 1	dupilicate Type	+ She	RWIN HY	16 MM	bove this line —	<u> </u>
1.	Corporate Name: _	Condonia	sium	Associa	tion		
	State or Country of	7	Ilino	is			
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):						ice of the
	Registered Agent:_	mir Rosla	~W4	fiddle Name		KRANS Last Name	Ki_pl
	Registered Office:	Number	, Fas	reet	Suite # (P.C	D. Box alone is unac	ceptable)
	-	Niles City		ZIP Ccde		County	,
4.	Name and Address	of Registered Agent a	nd Registered	Office after all cliang	es herein are r	reported:	,
45	Registered Agent:_	Rand First Name	/	Middle Name	4	Last Name	<u>N</u>
•	Registered Office:	<u> </u>	. Lin (Street	Suite # (PC	C. Box alone is unac	ceptable)
		Chicag	3	00659 ZIP Code		Cook	

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

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UNOFFICIAL COPY

	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 Da						
	Any Authorized Officer's Signature RESIDENT Name and Title (type or print)						
	If change of registered office by registered agent, sign here. (See Note 6 below): The undersigned, under penalties of perjury, affirms that the facts state herein are true and correct. Dated						
	Month & Day Year Signature of Registered Agent of Record						
	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 agen must be the same.						
2.	The registered office must include a street or road address (P.O. Box alone is unacceptable).						
	. A corporation cannot act as its own registered agent.						
4.	If the registered office is changed from one county to another, the corroration 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 Scretary 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.						
) .	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.						
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5.