

# UNOFFICIAL COPY



FORM **BCA 5.10/5.20** (rev. Dec. 2003)  
STATEMENT OF CHANGE OF  
REGISTERED AGENT AND/OR  
REGISTERED OFFICE  
Business Corporation Act

Doc#: **0802834124** Fee: \$26.50  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 01/28/2008 02:57 PM Pg: 1 of 2

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

**SECRETARY OF STATE JESSE WHITE FILED 12/12/07**

Remit payment in the form of a  
check or money order payable  
to Secretary of State.

File # **62583894** Filing Fee: \$25 Approved: **SG**  
Submit in duplicate Type or Print clearly in black ink Do not write above this line

1. Corporate Name: **SEVEN BRIDGES SURGICAL FACILITY, INC.** CP0893443

2. State or Country of Incorporation:

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:	<b>William</b>		<b>Biederman</b>
	First Name	Middle Name	Last Name
Registered Office:	<b>333</b>	<b>West Wacker Drive</b>	
	Number	Street	Suite # (P.O. Box alone is unacceptable)
	<b>Chicago</b>	<b>60606</b>	<b>Cook</b>
	City	ZIP Code	County

4. Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):

Registered Agent:	<b>William</b>		<b>Biederman</b>
	First Name	Middle Name	Last Name
Registered Office:	<b>222</b>	<b>North LaSalle Street</b>	<b>1910</b>
	Number	Street	Suite # (P.O. Box alone is unacceptable)
	<b>Chicago</b>	<b>60601</b>	<b>Cook</b>
	City	ZIP Code	County

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

6. The above change was authorized by: ("X" one box only)
- a.  Resolution duly adopted by the board of directors. (See Note 5 on reverse.)
  - b.  Action of the registered agent. (See Note 6 on reverse.)

SEE REVERSE FOR SIGNATURE(S).

