

# UNOFFICIAL COPY

FORM **NFP 112.45/113.60** (rev. Dec 2002)  
**APPLICATION FOR REINSTATEMENT  
DOMESTIC/FOREIGN CORPORATIONS**  
General Not For Profit Corporation Act



Doc#: **0806060024** Fee: \$26.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 02/29/2008 10:02 AM Pg: 1 of 1

# FILED

FEB 11 2008

JESSE WHITE  
SECRETARY OF STATE

Jesse White, Secretary of State  
Department of Business Services  
501 S. Second St., Rm. 350  
Springfield, IL 62756  
217-782-5797  
217-785-5782  
www.cyberdriveillinois.com

Remit payment in the form of a cashier's check, certified check, money order or an Illinois attorney's or CPA's check payable to Secretary of State. DO NOT SEND CASH.

File # 6323-601-2 Filing Fee: \$25 Approved: \_\_\_\_\_

----- Submit in duplicate ----- Type or Print clearly in black ink ----- Do not write above this line -----

1. a. Corporate Name as of date of issuance of Certificate of Dissolution or Revocation:

4941-45 N. St. Louis Condominium Association

b. Corporate Name if changed (See Note 2 on back.): \_\_\_\_\_

c. If a foreign corporation having authority to conduct affairs under an assumed corporate name restriction, the Assumed Corporate Name (See Note 3 on back.): \_\_\_\_\_

2. State of Incorporation: Illinois

3. Date Certificate of Dissolution or Revocation was issued: May 11, 2007

4. Name and Address of Registered Agent and Illinois Registered Office upon reinstatement:

Registered Agent: Joan M. Ferraro  
First Name Middle Name Last Name

Registered Office: 1616 N. Damen, Suite 100  
Number Street Suite # (P.O. Box alone is unacceptable)

Chicago 60647 Cook  
City ZIP Code County

NOTE: completion of Article 4 does not constitute a registered agent or office change. (See Note 4 on back.)

5. This application is accompanied by all delinquent reports together with the filing fees and penalties required. (See Note 1 on back.)

6. The undersigned corporation has caused this application to be signed by a duly authorized officer, who affirms, under penalties of perjury, that the facts stated herein are true.

**All signatures must be in BLACK INK.**

Dated November 25, 2007 4941-45 N. St. Louis Condominium Association  
Month & Day Year Exact Name of Corporation

[Signature]  
Any Authorized Officer's Signature

SIMON KILBURN (PRESIDENT)  
Name and Title (type or print)