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

Doc#: 0832508124 Fee: \$38.00 Eugene "Gene" Moore

Cook County Recorder of Deeds

Date: 11/20/2008 11:11 AM Pg: 1 of 2

¢h	emit payment in the form of a eck or money order payable Secretary of State.	R 3,2008: SECRE	TARY OF STATE; JES	SE WHIT	
	File #64	014100	Filing Fee: \$5 Approved: Do not write above this line	-JH - 	
1,	Q <sub>A</sub>	/NERS' ASSOCIATION	11510 <b>0</b> 510 3 01010 1 801 1 0		
2.	State or Country of Incorporation: ILLINOIS		CP0409734		
3.	Name and Address of Registered Agent and Registered Agent and Registered Secretary of State (before change):  Registered Agent: STUART A. FULLETT	stered Office as they a	appear on the records of the O	Office of the	
	First Name	Middle Name	Last Name		
	Registered Office: 1156 SHURE DRIVE, SUITE 14	<u> </u>			
	Number	Street	Suite # (P.O. Box alone is una	acceptable)	
	ARLINGTON	60004	COOK		
	City	212 Code	County		
4.	Name and Address of Registered Agent and Registered Office after all changes herein are reported:				
	Registered Agent: DEMETRIOS N. DALMARES				
	First Name	Middle Name	Last Name		
	Registered Office: 16061 S. 94TH AVENUE				
	Number	Street	Suite # (P.O. Box alone is una	acceptable)	
	ORLAND HILLS	60487	COOK		
	City	ZIP Code	County		
5.	The address of the registered office and the address identical.	s of the business office	of the registered agent, as chan	ged, will be	
6.	The above change was authorized by: (check one base.   Action of the registered agent. (See Note 6 of the change)	ectors. (See Note 5 on I	back.)		

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## UNOFFICIAL COPY 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 September , /6 _	200 <b>%</b> RI	DGELAND MANOR HOMEOWNERS' ASSOCIATION
Month & Day,  Month & Day,  Any Authorized Officer's Sign	Year	Exact Name of Corporation
CYNTHIA SMITH		
Name and Title (type or p	rint)	
If change of registered office by regineral transfer of personal transfe	erjury, affirms that the	facts stated herein are true and correct.
Month & Day	Year	Signature of Registered Agent of Record
	_	Name (type or print) If Registered Agent is a corporation,

## 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 OLUX from the Secretary 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.
- 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