

# UNOFFICIAL COPY



FORM NFP 112.45/113.60 (rev. Dec. 2003)

**APPLICATION FOR REINSTATEMENT  
DOMESTIC/FOREIGN CORPORATIONS**  
General Not For Profit Corporation Act

Doc#: 0912547001 Fee: \$40.25  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 05/05/2009 07:59 AM Pg: 1 of 1

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

**FILED**  
**MAR 31 2009**  
**JESSE WHITE**  
**SECRETARY OF STATE**

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 # 5373-705-6 Filing Fee: \$25 Approved AK

----- 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:  
4131-35 W. 93rd Place 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: 07-13-07

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

Registered Agent: Dennis M. Heywood  
First Name Middle Name Last Name

Registered Office: 13301 S. Ridgeland Avenue, Suite B  
Number Street Suite # (P.O. Box alone is unacceptable)

Palos Heights 60463 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 X FEB 4 2009 4131-35 W. 93rd Place Condominium Assoc.  
Month & Day Year Exact Name of Corporation

X Donna Lawrence  
Any Authorized Officer's Signature

Donna Lawrence, President  
Name and Title (type or print)