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

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

Doc#: 1006316031 Fee: \$38.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 03/04/2010 11:07 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

FEB 22 2010

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 # 6517-394-8 Filing Fee: \$25 Approved: JC

----- 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:

21 KRISTIN 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:

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

Registered Agent: MS REGISTERED AGENT SERVICES II, C.

First Name

Middle Name

Last Name

Registered Office: 191 N WACKER DR STE 1800

Number

Street

Suite # (P.O. Box alone is unacceptable)

CHICAGO

60606

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 FEBRUARY 22, 2010

Month & Day

Year

21 KRISTIN CONDOMINIUM ASSOCIATION

Exact Name of Corporation

Any Authorized Officer's Signature

GREGG HANDRICH, PRESIDENT

Name and Title (type or print)

CD