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FILING DEADLINE IS:

Aug

RETURN TO:

Corporation Department
Secretary of State
Springfield, IL 62756
Telephone (217) 782-7808

STATE OF ILLINOIS
DOMESTIC CORPORATION ANNUAL REPORT

CORPORATION
FILE NO.

D 4953-822-7

FILED

YEAR OF 1987

JIM EDGAR
Secretary of State

14

1.) CORPORATE NAME FIRST PAN HELLENIC CORPORATION
REGISTERED AGENT c/o EDWARD M. WHITE
REGISTERED OFFICE 33 W. Jackson Boulevard
CITY, IL, ZIP CODE Chicago, IL 60604
3 1 0 7 1 0 5 8 0

2.) AGENT/OFFICE CHANGES ONLY (see 11h)

FIRST PAN HELLENIC CORPORATION
Corporation Name
X Edward M. White
Registered Agent
X 33 W. Jackson Blvd.
Registered Office - Street Address
X Chicago, Cook, IL 60604
City, County, IL Zip Code

3.) Date incorporated 08/04/1969
Give complete address of principal office, if other than above:

Federal Employer Identification Number
(FEIN) 36-2681719

4.) The names and addresses of the officers and directors are: (If officers are directors, so state.)

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
Dan G. Pavis	Dir. & President	313 E. Walters Lane,	Itasca,	IL	60143
Edward M. White	Dir. & Secretary	33 W. Jackson Blvd.,	Chicago,	IL	60604
Kenneth Brooks	Dir. & Treasurer	117 E. Palatine Rd.,	Palatine,	IL	60067
Dan G. Pavis	Director	313 E. Walters Lane,	Itasca,	IL	60143
Kenneth Brooks	Director	117 E. Palatine Rd.,	Palatine,	IL	60067
Harry Coules	Director	1234 S. Flambeau,	Palos Heights,	IL	60463

5.) The type of business actually conducted in Illinois is: Real Estate Development

6.) Number of shares authorized and issued (as of 05/31/87)

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED
Non-Par	None	NPV	1,000,000	132,361

7a.) The amount of paid-in capital as of 05/31/87 is:

*PAID-IN CAPITAL \$

***Paid-in Capital** replaces the terms Stated Capital and Paid-in Surplus. It does not include Retained Earnings.

7b.) The Paid-in Capital as of 05/31/87 on record with the Secretary of State is:

TOTAL \$ 1,323,618

(The figure in Item 7b may not be altered.)

ITEM 8 MUST BE SIGNED

8.) By [Signature] (Any Authorized Officer's Signature) (Title) (Date)
(Pres. or V.P.s required, if changes listed in 2)
Attest [Signature] (Secretary's or ass't Secretary's Signature) (Title) (Date)
(Secretary's or ass't Secretary's Signature required only if changes listed in 2)

Under the penalty of perjury and as an authorized officer, I declare that this annual report and, if applicable, the statement of change of registered agent and/or office, pursuant to provisions of the Business Corporation Act, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

Box 197

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Property of Cook County

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