PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

FILING DEADLINE IS:

May 1, 1989

RETURN TÓ:

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

89428003

CORPORATION FILE NO. #D-5425-107-6

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1989 YEAR OF

DOMESTIC CORPORATION ANNUAL REPORT

FILED

1.)

CORPORATE NAME REGISTERED AGENT REGISTERED OFFICE CITY, IL, ZIP CODE

Liberty Mortgage Corporation c/o Michael A. Perlstein c/o Michael A. Felister...

140 South Dearborn Street, Suite 1 300 retary of State
2.) AGENT/OFFICE CHANGES ONLY (see 11h)

AUG 1 6 1989

JIM EDGAR

5/19/83 3.) Date Incorporated

Give complete address of principal office, if other

AUG 1 1 1989

Liberty Mortgage Corporation Corporation Name MICHAEL A. PERLSTEIN

Registered Agent

135 S. LaSalle St., #3800

Registered Office - Street Address

Chicago, Illinois 60603 City, County, IL Zip Code

Federal Employer Identification Number

4.) The names and addresses of the of the entry of the large (if officers are directors, so state.)

NAME	OFFICE	NUMBER & STREET	CITY	STATE	•	ZIP	
MICHAEL SHAPIRO	Vice-President	400 South Green	Street, Ch	icago, IL.	60607		<u> </u>
George Kilbourn	Secretary	400 South Green					<u></u>
	Treasurer	4					7,1
	Director						
	Director	9					700
	Director						

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

Mortgage ruscements

6.) Number of shares authorized and issued (as of

PAR VALUE **CLASS** SERIES NUMBER AUTHORIZED NUMBER ISSUED 1.00 2,000 Common 2,000

7a.) The amount of paid in capital as of

is:

- *PAID IN CAPITAL \$2,500.00
- "'Paid-in Capital" replaces the terms Stated Capital and Paid in Surplus. It does not include Retained Earnings.
- 2/28/99 7b.) The Paid-in Capital as of on record with the Secretary of State is:

TOTAL \$ _

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

TEM 8 MUST BE SIGNED

8.) By

(Any Authorized Officer's Signature) (Pres. or V. Pres. required if changes listed in 2)

Vice-Pres. 8/9/89

(Tille)

(Date)

Attest

(Secretary's or ass'l. Secretary's Signature required only if changes listed in 2)

(Title) (Date)

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

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T+0000 TRAN 5277 0°/12/87 14:48
+2415 + C *-59-4280
COOK COUNTY RECORDER

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