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Property of Cook County Clerk's Office

Whereas, THE REINSTATEMENT OF THE DARIEN APARTMENTS CONDOMINIUM HOMEOWNERS ASSOCIATION INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAS BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE GENERAL NOT FOR PROFIT CORPORATION ACT OF ILLINOIS, IN FORCE JANUARY 1, A.D. 1987.

Now Therefore, I, Jim Edgar, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois,

at the City of Springfield, this 22ND day of FEBRUARY AD 19 90 and of the Independence of the United States the two hundred and 14TH.

Jim Edgar
SECRETARY OF STATE

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UNOFFICIAL COPY

NP 112.45/113.60
(Rev. Jan. 1987)

JIM EDGAR
Secretary of State
State of Illinois

FILED
FEB 22 1990

File # N 5176-412-9

This Space For Use By
Secretary of State

Date 2.22.90

Filing Fee \$25

Clerk E.M.

Submit in duplicate. Remit payment in
Certified Check, Cashier's Check or
Money Order, payable to "Secretary of
State."

DO NOT SEND CASH!

APPLICATION FOR REINSTATEMENT OF STATE
OF
DOMESTIC OR FOREIGN CORPORATION
under the
General Not For Profit Corporation Act

Pursuant to the provisions of "The General Not Profit Corporation Act of 1986," the undersigned corpora-
tion hereby applies for reinstatement and submits the following statement.

1. The name of the corporation, as of the date of issuance of the certificate of dissolution or revocation, is
THE DARIEN APARTMENTS CONDOMINIUM HOMEOWNERS ASSOCIATION

and the name of the corporation as changed is _____

_____ (Note 1)

and, if a foreign corporation having a certificate of authority under an assumed corporate name restric-
tion, the assumed corporate name is _____

_____ (Note 2)

2. The date that the certificate of dissolution or revocation was issued was NOVEMBER 1, 19 89

3. The name and address of the registered agent and the registered office, upon reinstatement, will be:
(Note 3)

Registered Agent	<u>WILLIAM</u>	<u>EARLE</u>	
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>
Registered Office	<u>3100 N. LAKE SHORE DRIVE</u>		
	<small>Number</small>	<small>Street</small>	<small>Suite # (A.P.O. Box alone is not acceptable)</small>
	<u>CHICAGO, ILLINOIS</u>	<u>60657</u>	<u>COOK</u>
	<small>City</small>	<small>Zip Code</small>	<small>County</small>

4. This application is accompanied by all delinquent report forms together with the filing fees and
penalties required.

The undersigned corporation has caused this statement to be signed by its duly authorized
officers, each of whom affirm, under penalties of perjury, that the facts stated herein are true.

Dated February 5, 19 90

attested by Rosemary Gibbs
(Signature of Secretary or Assistant Secretary)
ROSEMARY GIBBS, SECRETARY
(Type or Print Name and Title)

THE DARIEN APARTMENTS CONDOMINIUM
HOMEOWNERS ASSOCIATION
(Name of Corporation)
by Fred Schmitz
(Signature of President or Vice President)
FRED SCHMITZ, PRESIDENT
(Type or Print Name and Title)



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DEPT-01 RECORDING \$14.00
 T#6666 TRAN 0630 04/02/90 12:45:00
 #5617 # E *-90-144211
 COOK COUNTY RECORDER

MS-5-M
 6-112-9

SECRETARY OF STATE

FEB 22 1990

E.H.M.E.

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