## **UNOFFICIAL COPY**

Form **BCA-5.10** 

NFP-105.10

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE 92905607

(Rev. Jan. 1991)

George H. Ryan Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647

OCT 1 9 1992

GEORGE HI DYAN

File # D5518 453 SUBMIT IN DUPLICATE

This space for use by

Secretary of titels 10-19-52 Date

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	nit payment in check or money er, payable to "Secretary of State."	SECRETA	ARY OF STATE	DEPT-ASPINEE		6	
1.	CORPORATE NAME: RAV	INES DEVELOPMENT.	CORPORATION	#5566 † A	9529 10/29/92 16 +-92-805 TY RECORDER	145 40	
2.	STATE OR COUNTRY OF	INCORPORATION:	ILLINOIS				
3.	Name and address of the re of the Secretary of State (a	egistered agent and r	egistered office a	as they appear on th	e records of the of	ffice	
	Registered Agent _	Ronald N. Pri	Middle Name - Last Name			<del></del> -	
	Registered Office _	Number Lansing [11]	Street	Sulle No. (A P.O. Bo	Sulle No. (A P.O. Box alone is not acceptable)		
4.	Name and address of the re	City egistered agent and r	Zip Code gis ered office s	hall be (after all cha	County nges herein report	ted):	
	Registered Agent _	Elaine J. Phi	1110;	in the Control of the	<b>*</b>		
	Oppietared Ollina	First Name 1252 WEST 127	Midde Name Ith Street	•	i.asi Nama		
	Registered Office	Number Calumet Park,	يونا ورام أحداني الترو بجوماء المنياء يجيح معادلة مراسي	Sulte No. (A P.O. Bo	x alone le not acceptable 07 C	6)	
	+ team	City	Zip Code		County	*********	
5.	The address of the registe changed, will be identical.	red office and the a	ddress of the bu	usiness chice of the	registered agent,	, as	
6.	The above change was aut a. XX By resolution duly a b. By action of the reg	dopted by the board	• •	(Note 5) (Note 6)	<b>925</b> 050 <b>6</b> 7	7	
NOT	<b>TE:</b> When the registered ag	ent changes, the sigi	natures of both p	resident and secreta	ary are required.		
7. who	(If authorized by the board The undersigned corporation om affirms, under penalties o	on has caused this sta	atement to be sign	ned by its duly autho are true.	rized officers, eac	:h of	
Date	od October ].	79, 19, 92	RAVINES DEV	CLOPMENT CORPORA	- <del></del>		
-44-	and the second of the second o	1/.	1	(Exact Mane of Confu	ation)		
aue	sted by Signature of Secretary of RUSSELL N. DEMARK			ignature of President or Vic MITH, PRESIDENT	•	, <del></del>	
	(Type or Print f	Name and Tille)	and a second	(Type or Print Name an	1 Title)	,a	
(If c	hange of registered office by The undersigned, under pe				rue.	is.	
Date	ed	10					

103.00E

(Signature of Registered Agent of Record)

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Droperty of County Clerk's Office