

# UNOFFICIAL COPY

Form LP 1110  
(Rev. August 1992)

GEORGE H. RYAN  
SECRETARY OF STATE  
STATE OF ILLINOIS

SUBMIT IN DUPLICATE!

REINSTATEMENT FEE \$100  
PLUS +  
PENALTY AMOUNT (#) \$100  
TOTAL \$200

## APPLICATION FOR REINSTATEMENT CERTIFICATE OF LIMITED PARTNERSHIP APPLICATION FOR ADMISSION

OFFICE USE ONLY

FILED  
66-37-40  
MH 0000051525  
FILED  
94/26/94  
5831L 04/26/94  
200.00 NP 0000061525 FILED

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope with prepaid postage is included.



DEPT-01 RECORDING  
147777 TRAN 0016 08/01/94 15:04:00  
47825 DW \* -94 -393074  
COOK COUNTY RECORDER

- Limited partnership's name: The Rogers Park Partnership, Ltd.
- File number assigned by the Secretary of State: S004967
- Federal Employer Identification Number (F.E.I.N.): 36-3151146
- Admitting name, foreign only, or assumed name, if any, under which the limited partnership is transacting business in Illinois: \_\_\_\_\_
- State of jurisdiction: Illinois
- The application for reinstatement is to return the limited partnership to good standing: (Check and complete where appropriate)
  - a) \$100 for one, \$200 for two - failure to file the renewal report(s) before the anniversary date.
  - b) \$100 for one, \$200 for two - failure to file the renewal report(s) within 90 days after the anniversary date. Default penalty.
  - c) \$100 for failure to file a "Certificate to be Governed" in the specified time allowed. (Prior to 1/1/90)
  - d) \$100 for failure to maintain a registered agent in this state as required.
  - e) \$100 for failure to report a FEIN within 180 days after filing the initial document with the Secretary of State.
  - f) Other (specify)
    - a) Failure to submit Certificate of Good Standing and/or Certificate of Existence.
    - b) Failure to renew required assumed name.

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Penalty of \$100 for each delinquency checked in item number 6 (a through e above).

The penalty amount is: \$ 200 (ENTER ABOVE)

This application must be accompanied by all delinquent reports and/or documents together with the filing fees and penalties required



BOX  
25-00 314  
23 Feb

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The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

The original application for reinstatement must be signed by at least one general partner.

*Mildred C. Banks*

(Signature)

Mildred C. Banks, Assistant Secretary

(Type or print name and title)

The National Housing Partnership, general partner

By: National Corporation for Housing Partnerships, its sole general partner

(Name of General Partner if a corporation or other entity)

(Signature must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

## FORMS OF PAYMENT:

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

**DO NOT SEND CASH!**

## RETURN TO:

Secretary of State  
Department of Business Services  
Limited Partnership Division  
Room 357, Howlett Building  
Springfield, Illinois 62756  
Telephone: (217) 785-8960

Property of Cook County Clerk's Office

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