

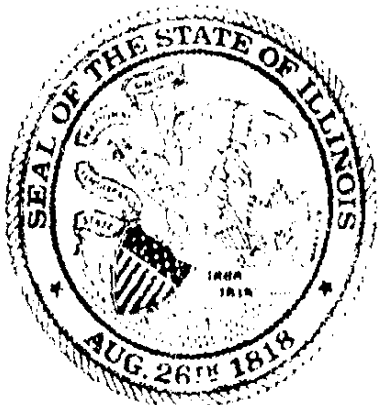


Whereas,

THE REINSTATEMENT OF
 FIRST RESIDENTIAL MORTGAGE, INC.
 INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAS BEEN FILED
 IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE BUSINESS
 CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

*Now Therefore, I, George H. Ryan, 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 28TH
 day of APRIL A.D. 19 94 and
 of the Independence of the United States
 the two hundred and 18TH.*



George H Ryan
 SECRETARY OF STATE

2700
 DP

Box
 314

Frm **BCA-12.45**
13.60

APPLICATION FOR REINSTATEMENT
DOMESTIC OR FOREIGN CORPORATIONS

94397941
File # D 5630-176-3

(Rev. Jan. 1991)
George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL 62756

FILED

SUBMIT IN DUPLICATE

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."

APR 23 1994
GEORGE H. RYAN
SECRETARY OF STATE

This space for use by Secretary of State
Date 4-28-94
Filing Fee \$ 100.00
Approved: [Signature]

- (a) Corporate name as of the date of issuance of the certificate of dissolution or revocation:
First Residential Mortgage, Inc.
DEPT. OF RECORDING \$77.00
T40004 TRAN 0705 05/03/94 15:29:00
11247 KB R-94-397941
COOK COUNTY RECORDER
- (b) Corporate name as changed: n/a (Note 1)
- (c) If a foreign corporation having a certificate of authority under an assumed corporate name restriction, the assumed corporate name: n/a (Note 2)

- State of incorporation: Illinois
- Date that the certificate of dissolution or revocation was issued: August 2, 1993

4. Name and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: (Note 3) NOTICE! Completion of item #4 does not constitute a registered agent or office change. See note #3 on back of this form

EXPEDITED

APR 28 1994

SECRETARY OF STATE

Registered Agent	David	M.	Lesser
	First Name	Middle Name	Last Name
Registered Office	525 W. Monroe Street, Suite 1600		
	Number	Street	Suite # (A.P.O. Box alone is not acceptable)
	Chicago	60661-3629	Cook
	City	Zip Code	County

- This application is accompanied by all delinquent report forms together with the filing fees, franchise taxes, license fee and penalties required.
- The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true.

Dated April 12, 19 94 First Residential Mortgage, Inc.
(Exact Name of Corporation)

attested by (tcr) Thomas Reynolds by [Signature]
(Signature of Secretary or Assistant Secretary) (Signature of President or Vice President)

Thomas C. Reynolds, Secretary Charles H. Walsh, President
(Type or Print Name and Title) (Type or Print Name and Title)

UNOFFICIAL COPY

NOTES

- Note 1: If the corporate name which the corporation had at the time of dissolution or revocation is not available for use at the time of reinstatement, the corporation shall set forth the new name by which it will hereafter be known. A change of corporate name must also be properly effected in accordance with the provisions of the Business Corporation Act of 1983. For domestic corporations, articles of amendment must be filed, pursuant to Section 10.30. For foreign corporations, the name must be changed in the state or country of incorporation by articles of amendment filed there, and an application for amended certificate of authority, together with a certified copy of the amendment, must be filed pursuant to Section 13.40.
- Note 2: If a foreign corporation's true name was not available for use when the original certificate of authority was issued, the corporation had to adopt an assumed corporate name for use in Illinois. When reinstating, an application for an assumed corporate name, pursuant to Section 4.15, must accompany the reinstatement application.
- Note 3: If either or both the registered agent or the registered office of the corporation has changed since the time of dissolution or revocation, the corporation shall properly report such a change on Form BCA-5.10 or on its most recent annual report form.

Telephone:

Domestic: (217) 782-5797

(217) 785-5782

Foreign: (217) 782-1837

C-89.11

94397941

DeKalb County Clerk's Office

UNOFFICIAL COPY

YEAR OF 1994
File Prior to: 03/01/94

STATE OF ILLINOIS DOMESTIC CORPORATION ANNUAL REPORT

CORPORATION
FILE NO.

D 5630-176-3

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

1.) CHANGES ONLY: REGISTERED AGENT Alan S. Finger
REGISTERED OFFICE 30 North LaSalle Street
CITY, IL ZIP CODE Chicago, IL 60602

COUNTY

2.) CORPORATE NAME, REGISTERED AGENT, REGISTERED OFFICE, CITY, IL, ZIP CODE

FIRST RESIDENTIAL MORTGAGE, INC.
DAVID M LESSER 030591
525 W MONROE ST STE 1600
CHICAGO, IL. 60661-3693

FILED

APR 28 1994

COOK

COUNTY GEORGE H. RYAN
SECRETARY OF STATE

3.) Date Incorporated 03/05/91

4.) The names and residential addresses of ALL officers & directors MUST be listed here!

OFFICE	NAME	NUMBER & STREET	CITY	STATE	ZIP
President	Charles H. Walsh	206 N. York Road	Elmhurst, IL		60126
Secretary	Thomas C. Reynolds	"			
Treasurer	Charles H. Walsh	"			
Director	Charles H. Walsh	"			
Director					

5.) If 51% or more of the stock is owned by a minority of female, please check appropriate box Minority Owned Female Owned

IMPORTANT! Whenever the amount in Item 6 or 7a differs from the Secretary of State's records, the enclosed BCA 14.30 must be completed.

6.) Number of shares authorized and issued (as of 12/31/93):

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED
Common	None	.01000	10,000	1,000

7a.) The amount of paid-in capital as of 12/31/93 is: \$ 1,000.00

7b.) The Paid-in Capital on record with the Secretary of State is: \$ 1,000.00

8.)  Pres. 4/27/94

(Any Authorized Officer's Signature)

(Title)

(Date)

EXPEDITED

APR 28 1994

SECRETARY OF STATE

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.

RETURN TO:

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

ITEM 8 MUST BE SIGNED!

(PLEASE COMPLETE THE REVERSE SIDE OF THIS REPORT)

PRESIDENT

SECRETARY

IF THE ABOVE OFFICERS' NAMES AND ADDRESSES ARE MISSING OR HAVE CHANGED, ENTER ONLY THE ADDITIONS OR CORRECTIONS BELOW.

D 5630-176-3

File No.

PRESIDENT Charles H. Walsh 206 N. York Road, Elmhurst, IL 60126

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

SECRETARY Thomas C. Reynolds 206 N. York Road, Elmhurst, IL 60126

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

ENTER FEDERAL EMPLOYER IDENTIFICATION NUMBER IF NOT PRINTED