

UNOFFICIAL COPY

Form LP 202
(Rev. Jan. 1995)

Filing Fee \$15

SUBMIT IN DUPLICATE!

File # C005113

Assigned by
Secretary of State

96467666

FILING DEADLINE IS
PRIOR TO

DEPT-01 RECORDING \$23.50
T20003 TRAN 0323 06/18/96 15:53:00
45173 \$ MC *--96-467666
COOK COUNTY RECORDER

JANUARY 1, 1996
month, day, year

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.

GEORGE H. RYAN
SECRETARY OF STATE
STATE OF ILLINOIS

BIENNIAL RENEWAL REPORT
(Illinois or foreign limited partnership)

DO NOT MAKE CHANGES ON THIS FORM. IF CHANGES ARE NECESSARY, AMENDMENT FORM LP 202 (ILLINOIS) OR LP 905 (FOREIGN) AND THE \$25 FEE IS REQUIRED.

- Limited partnership's name: ATLANTIC DRIVE LIMITED PARTNERSHIP
- Address of office where records required by Section 104 (Illinois) or Section 902 (foreign) are kept (P.O. Box alone & c/o are unacceptable): 311 W. SUPERIOR STREET, SUITE 525, CHICAGO, ILLINOIS 60610
- File number assigned by the Secretary of State: C005113
- Federal Employer Identification Number (F.E.I.N.): 36-3702944
- Assumed name, if any: _____
- Admitting name, if any (foreign only): _____
- Registered agent: Investors' Equities Corporation
First name _____ Middle name _____ Last name _____
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 311 W. Street Superior Street Suite# 525
City Chicago County Cook State Illinois Zip Code 60610
- State of jurisdiction: Illinois, if foreign, that this limited partnership is validly

existing as a limited partnership under the laws of Illinois as of this date and that it still exists in Illinois.

C005113 5051L 05/24/96
15.00 BR 0000023064 FILED



Handwritten signature or initials.

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Form LP-1136
(Rev. Jan. 1995)

I affirm that any entity serving as a general partner for this limited partnership is in good standing in its home state.

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

Renewal report must be signed by a general partner.
Investors Equities Corporation

Signature By: [Signature]

Type or print name and title Barry L. Weinstein, President

Name of General Partner if a corporation or other entity _____

(Signature must be in **BLACK 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

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