UN	10FFIC	IAL COP	97828159 Page 1 of 1
Form BCA-5.10	SIAILMLI	NT OF CHANGE _{899/} TERED AGENTCook	0016 48 001 1997-11-05 08:45:14
NFP-105.10	ę .	ISTERED OFFICE	County Recorder 23.50 File # N 5192-680-5
(Rev. Jan. 1991)			SUBMIT IN DUPLICATE
George H. Ryan Secretary of State Department of Business Services Springlield, IL 62756 Telephone (217) 782-6961 Remit payment in check or money		SEP 1 2 1997 GEORGE H. RYAN CRETARY OF STATE	This space for use by Secretary of State Date (+) + () Filing Fee \$5
order, payable to "Secretary of State."			Approved:
1. CORPORATE NAME: S	HENANDOAH TOWN	HOME OWNERS' ASSO	CIATION
2. STATE OR COUNTRY OF	INCORPORATION:	<u> 111inois</u>	
3. Name and address of the re of the Secretary of State (F.		egistered office as they a	appear on the records of the office
	Madeline	Т.	Chisholm
	First Name	Middle Name	Last Name
Registered Office _	16610 Grants		No. (A P.O. Box alone is not acceptable)
	Orland Pack	60467	Cook
A Nome and address of the	City	Zip Code	County
		gistereo onice strail de (A.	fter All Changes Herein Reported):
Registered Agent	First Name	Fuciale Name	Georgas Last Name
Registered Office	16647 Grants	Trail	
.	Number		PNo (A P.O. Box alone is not acceptable)
****	Orland Park	60467	Cook
5. The address of the registe changed, will be identical.	cuy red office and the ad	Zip Code ddress of the business	Counti alice of the registered agent, as
 6. The above change was autianal. ∑ By resolution duly at a b. □ By action of the region. 	dopted by the board	of directors. (No	te 5)
NOTE: When the registered ago	ent changes, the sign	natures of both President	and Secretary are required.
7. (If authorized by the board The undersigned corporatio whom affirms, under penalties of	n has caused this sta	tement to be signed by its	s duly authorized officers, each of
	19,97		NHOME OWNERS' ASSOCIATIO
Dated August 11	19, 4		Hame of Corporation)
attested by	-	by Syda	Jul organ
(Signalure of Secretary or CAROL O'BRYAN, (Type or Print N	Secretary	LYNDA GEORGAS,	President or Vice Presidents President (Print Name and Title)
(If change of registered office by The undersigned, under per			herein are true
Dated	19,		11/1/

(Signature of Registered Agent of Record)

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