## **UNOFFICIAL COPY**

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File # N 5765-932-7

Form BCA-5.10 NFP-105.10

(Rev. April 1995)

George H. Rya::
Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-364;
http://www.sos.state.il.us

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

With 16 1997

GEORGE A. RYAN SECRETARY OF STATE

TRAN 2204 01/31/97 10:15:00

This space for use by Secretary of State

\_ 4161917

DEPT-01 RECORDING

Approved:

Date

Remit payment in check or money order, payable to "Secretary of State."

County

CORPORATE NAME: Illinois Amvets Geriatric Research & Figurational Center

Name and address of the registered agent and registered office as they appear on the records of the office
of the Secretary of State (before change):

Registered Agent Charles J. Bellock
First Name Middle Name Last Name

Registered Office 55 k MONROE ST STE 3230

Number Street Suite No. (A P.O. Box alone is not acceptable)

CHICAGO 60603 COOK

ZIP Code

4. Name and address of the registered agent and registered office shall be (after all changes herein reported):

Registered Agent HONARD L. STONE

First Name Middle Name Last Name

Registered Office 55 E MONROE ST STE 3230

Number Street Suite No. (A P.O. Box alone is not acceptable)

CHYCACO 60603 COOK

CHICAGO 60603 COOK
City ZIP Code County

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	The address of the registered office and the address will be identical.	ess of the business office of the registered agent, as changed,
6	. The above change was authorized by: ("X" one	
	<ul> <li>a. By resolution duly adopted by the board</li> </ul>	of directors. (Note 5)
	b.   By action of the registered agent.	(Note 6)
N	OTE: When the registered agent changes, the sig	matures of both president and secretary are required.
7	. (If authorized by the board of directors, sign he	ore See Note 5)
w	The undersigned corporation has caused this st hom affirms, under penalties of perjury, that the fac-	atement to be signed by its duly authorized officers, each of
D	ated \$19.96	
at	tested by Karle 3 homes	by function (Exact Name of Corporation) CENTER
	Signature of Socretary or Assistant Socretary,	(a.3. mino our regulative Ab Area L 1624/9417)
	CHARLES THOMAS, SECRETALLY	LINCOLN S. TAMRAZ, PRESIDENT
	(Type or Print Name and Title)	Type or Print Name and Title)
The undersigned, under penalties of perjury, affirms to Dated		
		(Signature of Registered Agent of Record)
	N	OTES 7
1.	The registered office may, but need not be the sa registered office and the office address of the reg	ame as the principal office of the corporation. However, the gistered agent must be the same.
2.	The registered office must include a street or road address; a post office box number along is not acceptable.	
3.	A corporation cannot act as its own registered agent.	
4.	If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.	
9800 9800	Any change of registered agent must be by resolution adopted by the board of directors. This statement must then be signed by the president (or vice-president) and by the secretary (or an assistant secretary).	
92007078 2	The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent.	