UNOFFICIAL COPY

File D 5688-8195

Form BCA-5.10 NFP-105.10

(Rev. Jan. 1995)

George H. Ryan
Secretary of State
Department of Business Services
Springfield, IL. 62756
Telephone (217) 782-3647

STATEMENT OF
CHANGE
OF REGISTERED AGENT
AND/OR REGISTERED
OFFICE

INCOME A PERSONAL PROPERTY.

\$23.50

c7098775

I: E TERM 3.36 02/11/97 13:04:00

#11 #-97-098775

TOOK COUNTY RETURNER

FILED

JAN -3 1997

GEORGE M. RYAN SECRETARY OF STATE

SUBMICLE WPLICATE

This space for use by Secretary of State

Date

Filing Fee

\$,5

Approved:

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

				40	payable to Secretary of State."	
				2		
1.	CORPORATE NAME: _G	T Real Es	tate Hold	ling Corpor	ation	
2.	STATE OR COUNTRY O	F INCORPO	RATION:	Illinois_		
3.	Name and address of the of the Secretary of State (registered ag before chang	ent and regis	tered office as t	they appear on the ecords of the	office
	Registered Agent	John First Name	· · · · · · · · · · · · · · · · · · ·	E. Middle Name	Partelow Last Name	- <u>6</u> -
	Registered Office	300 s Number	Nacker Dr Street		Suite 3130	17 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -
4.	Name and address of the	Chicago City registered ago	ent and regist	50606 Zio Code	Cook County be (after all changes herein rep	
	Registered Agent -			Middle Name	Partelow Last Name	
, t	Registered Office -	820 West Number	Jackson Street		P.O. Box alone is not acceptable)	Krib
	_	_Chicago_		60607	Cook	•
		City		Zip Code	County	1

UNOFFICIAL COPY

5.	The address of the registered office and the address of the busin will be identical.	ess office of the registered agent, as changed,					
6.	The above change was authorized by: ("X" one box only)						
	a. By resolution duly adopted by the board of directors.	(Note 5)					
	b. Kx By action of the registered agent.	(Note 6)					
		·					
NC	OTE: When the registered agent changes, the signatures of both	president and secretary are required.					
7 .		•					
	The undersigned corporation has caused this statement to be s	signed by its duly authorized officers, each of					
Wh	om affirms, under penalties of perjury, that the facts stated herei	n are true.					
De	eted 19,						
Ut.		(Exact Name of Corporation)					
ati	ested by by						
	(Signature of Secretary or Assistant Secretary)	(Signature of Vice President)					
	(Type or Print Name and Title)	(Type or Print Name and Title)					
	(Type of Flatt teams and two)	(Type or rain Haine and True)					
Af :	change of registered office by registered agent, sign here. See A	lote §					
•	The undersigned, under penalties of perjury, affirms that the fa	icts stated herein are true.					
Des	10	1 - Att					
DE	ted November 14 19, 96	prature of Registered Agent of Record)					
	/ (-,						
	•	0.					
	NOTES	7,					
1.	The registered office may, but need not be the same as the prin registered office and the office address of the registered agent						
2.	The registered office must include a street or road address; a post office box number alone 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 obt	tained ONLY from the Secretary of State.					
	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 s	secretary (or an assistant secretary).					
6 .	The registered agent may report a change of the registered office registered agent. When the agent reports such a change, this s	ice of the corporation for which he or she is					
	agent.	successful indat be algred by the registered					