

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000506

FILED
Apr 12, 2010
Secretary of State

Entity Name: THE UNIVERSITY OF CHICAGO, INCORPORATED

Current Principal Place of Business:

5801 SOUTH ELLIS AVENUE
SUITE 619
CHICAGO, IL 60637

New Principal Place of Business:

Current Mailing Address:

5801 SOUTH ELLIS AVENUE
SUITE 619
CHICAGO, IL 60637

New Mailing Address:

FEI Number: 36-2177139

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PT
Name: ZIMMER, ROBERT J
Address: 5801 SOUTH ELLIS AVENUE, STE 502
City-St-Zip: CHICAGO, IL 60637

Title: V
Name: HARRIS, BETH A
Address: 5801 SOUTH ELLIS AVENUE, STE 619
City-St-Zip: CHICAGO, IL 60637

Title: V
Name: NONDORF, JAMES G
Address: 1101 EAST 58TH STREET, ROOM 105A
City-St-Zip: CHICAGO, IL 60637

Title: S
Name: FITHIAN, DAVID B
Address: 5801 SOUTH ELLIS AVENUE, STE 501
City-St-Zip: CHICAGO, IL 60637

Title: V
Name: GREENE, DAVID A
Address: 5801 SOUTH ELLIS AVENUE, RM 501
City-St-Zip: CHICAGO, IL 60637

Title: V
Name: CHINNIAH, NIMALAN
Address: 5801 SOUTH ELLIS AVENUE, STE 502
City-St-Zip: CHICAGO, IL 60637

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BETH A. HARRIS

V

04/12/2010

Electronic Signature of Signing Officer or Director

_____ Date