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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morburn
Secretary of State
DIVISION OF CORPORATIONS

MAR 13 AM 9:10

DOCUMENT # **F9300000566**

1. Corporation Name
ZM, Inc.

500001429695
-03/15/95--01024--008
******225.00 ****225.00**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
c/o Ann M. Schneider **c/o Ann M. Schneider**
2 N. Riverside Plaza **2 N. Riverside Plaza**
Chicago, IL 60606 **Chicago, IL 60606**

3. Date Incorporated or Qualified **2/4/93** 3a. Date of Last Report
4. FEI Number **36-3558203** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional**
Fee Required
6. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent
The Prentice-Hall Corporation System, Inc.
1201 Hays Street, Suite 105
Tallahassee, FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	Director/VP/Treasurer
NAME	Arthur A. Greenberg
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606
TITLE	Director
NAME	Donald Phillips
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606
TITLE	Director/VP/Secretary
NAME	Shelli Z. Rosenberg
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606
TITLE	Director/President
NAME	Samuel Zell
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606
TITLE	Asst. Secretary
NAME	Ann M. Schneider
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606
TITLE	Vice President
NAME	Donald J. Liebenritt
STREET ADDRESS	2 N. Riverside Plaza
CITY-ST-ZIP	Chicago, IL 60606

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation; and that my signature shall have the same legal effect as if made under oath; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ **3/8/95** **312-466-3607**
Ann M. Schneider, Asst. Secretary **3-13-95**