

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2005 08:00 AM
Secretary of State

DOCUMENT # F99000004923

1. Entity Name
SDC LATITUDES AT THE MOORS, INC.



Principal Place of Business
ATTN: S. MCCLINTOCK
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 60611-1901

Mailing Address
ATTN: S. MCCLINTOCK
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 60611-1901



01312005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
94-3340629

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------------------------|
| TITLE | PD |
| NAME | COOK, ROBERT J |
| STREET ADDRESS | 875 NORTH MICHIGAN AVE., 41ST FLOOR |
| CITY- ST- ZIP | CHICAGO, IL 606111901 |
| TITLE | V |
| NAME | KING, DONALD A JR. |
| STREET ADDRESS | 875 NORTH MICHIGAN AVE., 41ST FLOOR |
| CITY- ST- ZIP | CHICAGO, IL 606111901 |
| TITLE | V |
| NAME | HUGHES, CHRISTOPHER L |
| STREET ADDRESS | 875 NORTH MICHIGAN AVE., 41ST FLOOR |
| CITY- ST- ZIP | CHICAGO, IL 606111901 |
| TITLE | S |
| NAME | FERKULL, PAULA M |
| STREET ADDRESS | 875 NORTH MICHIGAN AVE. 41ST FLOOR |
| CITY- ST- ZIP | CHICAGO, IL 606111901 |
| TITLE | T |
| NAME | CASSELLINI, MARLENA M |
| STREET ADDRESS | 101 CALIFORNIA ST 26 FLOOR |
| CITY- ST- ZIP | SAN FRANCISCO, CA 941115853 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY- ST- ZIP | |

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02/23/05-80021-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert J. Cook

Robert J. Cook, President

2/2/05

312-266-9300

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #