2003 LIMITED PARTNERSHIP

By: PRGP Corp., a Delaware corporation, the general partner SIGNATURE: John Kevin

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SIGNATURE: .

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DOCUMENT # B0100000326 1. Entity Name PRITZKER REALTY GROUP, L.P.					03 APR - 1 AM 10: 36
Principal Place of Business 200 WEST MADISON STREET, 37TH FLOOR CHICAGO IL 60606 Mailing Address 200 WEST MADISON CHICAGO IL 60606 CHICAGO IL 60606			AADISON STREET, 37TH FLOOR		SECRETARY OF STAIL TAPERAHASSEFFFEERIOA
Principal Place of Business 3. Mailing Address		3. Mailing Address			- I TORNITA DEN CONEL NICHT BERNT BONN CONN CONT CONTROL NICHT STEIN CHAIR STEIN CHAI SEN
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003
City & State		City & State		<u> </u>	4. FEI Number APPLIED FOR Applied For Not Applicable
Žip	Country	Country Zip C		ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent	·		7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY				Name	
	'S STREET			Street Address (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32301-2525					
v v		•	City		FL Zip Code
SIGNATURE .	40 117.17.17.17.17.	10. Amount of Capit		butions	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
as Shown	A GENERAL PARTNER T		TITY M		SEE REVERSE SIDE FOR FEE INFORMATION ERED AND ACTIVE WITH THIS OFFICE.
12.	NOTE: General Partners MA GENERAL PARTNER		ne form	ı; an amenamen	t must be filed to change a general partner. ADDRESS CHANGES ONLY
DOCUMENT #	F02000001180	THY ORIMATION	1-		ADDITED OF MINISTER
NAME STREET ADDRESS	PRGP CORP. 200 WEST MADISON STREET, 37TH FLOOR			EET ADDRESS	<u></u>
CITY-ST-ZIP DOCUMENT #	CHICAGO IL 60606		-	'-ST-ZIP	04/01/030103502S **88.75
NAME			STRI	EET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	600012873456 02/21/0301001025 **52,50
OOCUMENT #	a marana na ang manganan mang	ಆರ್.೨೮೮ ಆರ್. ಮಹಾಸಿನಿಸ	STRE	EET-ADDRESS	— 027 C1703 -01001 - 013 - 4-3C100
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STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT # NAME STREET ADORESS			STRE	EET ADDRESS	
CITY-ST-ZIP			CITY	-ST-ZIP	M THOMAS
OOCUMENT #			STRE	EET ADDRESS	W IIIO
STREET ADDRESS CITY-ST-ZIP			1	-ST-ZIP	
 I hereby of indicated the receiver 	ertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute this	this filing does not qualify for that my signature shall have s report as required by Chapt	the exe the same ter 620, f	mption stated in Se e legal effect as if m Florida Statutes	ction 119.07(3)(i), Florida Statutes. I further certify that the information hade under oath; that I am a General Partner of the limited partnership or

John Kevin Poorman, Vice President

02/12/03