

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90079 015 ***150.00

0567516

DOCUMENT # F00000000254

1. Entity Name

GGP-LAKELAND SQUARE II, INC.

Principal Place of Business

**110 NORTH WACKER DRIVE
 CHICAGO IL 60606**

Mailing Address

**110 NORTH WACKER DRIVE
 CHICAGO IL 60606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **36-4338552**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME **PD**
 STREET ADDRESS **MICHAELS, ROBERT A**
 CITY-ST-ZIP **110 NORTH WACKER DRIVE
 CHICAGO IL 60606** ☐ Delete

TITLE
 NAME **VTD**
 STREET ADDRESS **FREIBAUM, BERNARD**
 CITY-ST-ZIP **110 NORTH WACKER DRIVE
 CHICAGO IL 60606** ☐ Delete

TITLE
 NAME **S**
 STREET ADDRESS **EISENBERG, MARSHALL E**
 CITY-ST-ZIP **2 NORTH LASALLE STREET, SUITE 2200
 CHICAGO IL 60602** ☐ Delete

TITLE
 NAME **CEO**
 STREET ADDRESS **BUCKSBAUM, JOHN**
 CITY-ST-ZIP **110 NORTH WACKER DRIVE
 CHICAGO IL 60606** ☐ Delete

TITLE
 NAME **V**
 STREET ADDRESS **BATESOLE, JON E**
 CITY-ST-ZIP **110 NORTH WACKER DRIVE
 CHICAGO IL 60606** ☒ Delete

TITLE
 NAME **VAS**
 STREET ADDRESS **GERN, RONALD**
 CITY-ST-ZIP **110 NORTH WACKER DRIVE
 CHICAGO IL 60606** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bernard Freibaum

Bernard Freibaum

4-23-01

Date

312-960-5205

Daytime Phone #

CR2E034 (10/00)