2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# F01000002872

Entity Name: CRSI SPV 1996 PW2, INC.

Current Principal Place of Business:

6954 AMERICANA PARKWAY
REYNOLDSBURG, OH 43068

New Principal Place of Business:

TWO N. RIVERSIDE PLAZA
CHICAGO, IL 60606

Current Mailing Address:

6954 AMERICANA PARKWAY
REYNOLDSBURG, OH 43068

New Mailing Address:

TWO N. RIVERSIDE PLAZA
CHICAGO, IL 60606

FEI Number: 31-1475361 **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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	STROHM, BRUCE C	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	
Title:	EV	( ) Delete
Name:	FOX, LESLIE B	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	
Title:	V	( ) Delete
Name:	POTTS, TAMRA L	
Address:	6954 AMERICANA PARKWAY	
City-St-Zip:	REYNOLDSBURG, OH 43068	
Title:	VAS	( ) Delete
Name:	MATZ, JANE	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	
Title:	VASD	( ) Delete
Name:	DUWE, YASMINA	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	
Title:	VAS	(X) Delete
Name:	RENCH, JENNIFER	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	SHUMAN, BARBARA	
Address:	TWO NORTH RIVERSIDE PLAZA, STE. 400	
City-St-Zip:	CHICAGO, IL 60606	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA SHUMAN S 05/01/2006

Electronic Signature of Signing Officer or Director Date