## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003905

Entity Name: GREAT NORTHERN FINANCIAL CORPORATION

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ROAD, SUITE 40 MEADOWS, IL 600					
Current Mailing Address:			New Maili	New Mailing Address:		
2850 GOLF ROAD, SUITE 403 ROLLING MEADOWS, IL 60008						
FEI Number: 39-1821003 FEI Number Applied For ( ) FEI			FEI Number Not App	umber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US						
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	
Election Cam	paign Financing Tru	st Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PCD ( ) Dele VAN PEENEN, CURT 2850 GOLF ROAD, S ROLLING MEADOW	- SUITE 403	Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Dele LAGIOIA, JOSEPH 2850 GOLF ROAD, S ROLLING MEADOW	SUITE 403	Title: Name: Address: City-St-Zip:	EVPD (X) Char SHOEMACHER, ROS 2850 GOLF ROAD, S ROLLING MEADOW	SUITE 403	
Title: Name: Address: City-St-Zip:	EVP () Dele GERALD, CREWS 2850 GOLF ROAD, S ROLLING MEADOWS	SUITE 403	Title: Name: Address: City-St-Zip:	VPSD (X) Char CROSS, CHARLES 2850 GOLF ROAD, S ROLLING MEADOW		
Title: Name: Address: City-St-Zip:	VSTD () Dele BYRNE, GARY 2850 GOLF ROAD, S ROLLING MEADOWS	SUITE 403	Title: Name: Address: City-St-Zip:	V (X) Chai VAN PEENEN, STAC 2850 GOLF ROAD, S ROLLING MEADOW	SUITE 403	
Title: Name: Address: City-St-Zip:	EVP (X) Dele CROSS, CHARLES 2850 GOLF ROAD, S ROLLING MEADOW	SUITE 403	Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	
Title: Name: Address: City-St-Zip:	V (X) Dele VAN PEENEN, STAC 2850 GOLF ROAD, S ROLLING MEADOW	EY SUITE 403	Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	

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: CHARLES CROSS VP 01/17/2007