2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F01000004610

1. Entity Name
LOCKUP DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
800 FRONTAGE ROAD NORTHFIELD, IL 60093	800 FRONTAGE ROAD NORTHFIELD, IL 60093

01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3326994
☐ 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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	SOUDAN, ROBERT A
STREET ADDRESS	110 SHERIDAN ROAD
CITY-ST-ZIP	WINNETKA, IL 60093
TITLE	V
NAME	SAMPLE, CHARLES F
STREET ADDRESS	50 QUAIL LANE
CITY-ST-ZIP	HYANNIS PORT, MA 02647
TITLE	SD
NAME	SAMPLE, CHARLES W
STREET ADDRESS	706 COUNTRY LANE
CITY-ST-ZIP	GLENCOE, IL 60022
TITLE	V
NAME	SOUDAN, ROBERT A JR.
STREET ADDRESS	1120 SKOKIE RIDGE DRIVE
CITY-ST-ZIP	GLENCOE, IL 60022
TITLE	V
NAME	HIELSCHER, RICHARD B
STREET ADDRESS	1468 SCOTT AVE
CITY-ST-ZIP	WINNETKA, IL 60093
TITLE	AS
NAME	GAIL, SANFORD R
STREET ADDRESS	7921 LYONS
CITY-ST-ZIP	MORTON GROVE, IL 60053

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02/15/06-80007-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 A. Soudan, Jr. 1-24-06 847-441-7760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #