

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005464

FILED
Apr 15, 2009
Secretary of State

Entity Name: CLASSIC DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

71 S WACKER DRIVE
SUITE 900
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

71 S WACKER DRIVE
SUITE 900
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-3572949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RICHARDSON, RANDAL
Address: 71 S WACKER DRIVE, STE 900
City-St-Zip: CHICAGO, IL 60606

Title: VCD () Delete
Name: POORMAN, JOHN K
Address: 71 S WACKER DRIVE, STE 900
City-St-Zip: CHICAGO, IL 60606

Title: D () Delete
Name: PRITZKER, NICHOLAS J
Address: 71 S WACKER DRIVE, STE 900
City-St-Zip: CHICAGO, IL 60606

Title: VAS () Delete
Name: SMITH, GARY
Address: 71 S WACKER DRIVE, STE 900
City-St-Zip: CHICAGO, IL 60606

Title: VS () Delete
Name: FIELDS, STEPHANIE
Address: 71 S WACKER DRIVE, STE 900
City-St-Zip: CHICAGO, IL 60606

Title: CD () Delete
Name: PRITZKER, PENNY
Address: 71 S. WACKER DRIVE, STE. 900
City-St-Zip: CHICAGO, IL 60606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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: STEPHANIE FIELDS

VS

04/15/2009

Electronic Signature of Signing Officer or Director

Date