

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005414

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** SHEFFIELD PROPERTIES OF ILLINOIS INC.

**Current Principal Place of Business:**

555 SKOKIE BLVD. #555  
SKOKIE, IL 60062

**New Principal Place of Business:**

555 SKOKIE BLVD. #555  
NORTHBROOK, IL 60062

**Current Mailing Address:**

31356 VIA COLINAS  
WESTLAKE VILLAGE, CA 91362

**New Mailing Address:**

**FEI Number:** 94-3293754      **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

**OFFICERS AND DIRECTORS:**

**Title:** CP  
**Name:** COLBURN, DAVID D  
**Address:** 555 SKOKIE BLVD. #555  
**City-St-Zip:** NORTHBROOK, IL 60062

**Title:** DS  
**Name:** BRADFORD, DAVID T  
**Address:** 31356 VIA COLINAS  
**City-St-Zip:** WESTLAKE VILLAGE, CA 91362

**Title:** DT  
**Name:** WING, BRIAN  
**Address:** 31356 VIA COLINAS  
**City-St-Zip:** WESTLAKE VILLAGE, CA 91362

I hereby 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 all other like empowered.

SIGNATURE: DAVID T BRADFORD

SECR

04/19/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date