2006 FOR PROFIT CORPORATION FILED Aug 04, 2006 08:00 AN Secretary of State ANNUAL REPORT **DOCUMENT # F03000006353** GK DEVELOPMENT, INC. Principal Place of Business Mailing Address 303 E MAIN STREET **303 E MAIN STREET SUITE 201** SUITE 201 BARRINGTON, IL 60010 BARRINGTON, IL 60010 CR2E034 (11/05) 07172006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 56-4052786 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent **C T CORPORATION SYSTEM** DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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.

	FIĹE	NOWIII	FEE IS	\$150.00
	Due	by Sept	ember	6, 2006

Signature, typed or printed name of registered agent and title if applicable.

SIGNATURE.

- 9. Election Campaign Financing Trust Fund Contribution.
- \$5.00 May Be Added to Fees

(NOTE: Registered Agent signature required when reinstating)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Applied For

\$8.75 Additional

Fee Required

Not Applicable

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT KHOLAMIAN, GARO 303 E MAIN STREET, STE 201 BARRINGTON, IL 60010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAST, CHARLENE 303 E MAIN STREET, STE 201 BARRINGTON, IL 60010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KVETON, GREG 303 E MAIN STREET, STE 201 BARRINGTON, IL 60010
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 emboyered 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:

CITY-ST-ZIP