

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000295

FILED  
Jan 11, 2010  
Secretary of State

Entity Name: BARBARA BURRELL LTD. INC.

**Current Principal Place of Business:**

3750 NORTH LAKE SHORE DR.  
#14D  
CHICAGO, IL 60613

**New Principal Place of Business:**

**Current Mailing Address:**

3750 NORTH LAKE SHORE DR.  
#14D  
CHICAGO, IL 60613

**New Mailing Address:**

FEI Number: 36-3729930      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: BURRELL, BARBARA  
Address: 3750 NORTH LAKE SHORE DRIVE, #14D  
City-St-Zip: CHICAGO, IL 60613

Title: VP  
Name: BURRELL, JASON  
Address: 861 WEST CARMEN, #3  
City-St-Zip: CHICAGO, IL 60640

Title: EVP  
Name: BURRELL, BONITA  
Address: 680 N LAKE SHORE DRIVE, #1225  
City-St-Zip: CHICAGO, IL 60611

Title: VP  
Name: BURRELL, ALEXANDRA  
Address: 1305 S MICHIGAN AVE, APT 1413  
City-St-Zip: CHICAGO, IL 60605

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: BARBARA BURRELL

PSDT

01/11/2010

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

\_\_\_\_\_ Date