

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90006 042 ***150.00

DOCUMENT # F06000006056 1. Entity Name IGGYS HOUSE REALTY, INC.			
Principal Place of Business 205 N. MICHIAN AVENUE SUITE 4000 4400 CHICAGO, IL 60601		Mailing Address 205 N. MICHIAN AVENUE SUITE 4000 4400 CHICAGO, IL 60601	
2. Principal Place of Business - No P.O. Box # 205 N Michigan Ave Suite, Apt. #, etc. Suite 4400 City & State Chicago, Illinois Zip 60601 Country USA		3. Mailing Address 205 N Michigan Ave Suite, Apt. #, etc. Suite 4400 City & State Chicago, Illinois Zip 60601 Country USA	
4. FEI Number 20-5734887		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR. STE 4 WESTON, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOX, JOSEPH 205 N. MICHIAN AVENUE, SUITE 4400 CHICAGO, IL 60601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT FOX, YITZHOK 205 N. MICHIAN AVENUE, SUITE 4400 CHICAGO, IL 60601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT FOX, YITZHOK 702 N 129th St, Suite 116 Omaha, NE 68154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOX, YITZHOK ASST. 205 N. MICHIAN AVENUE, SUITE 4400 CHICAGO, IL 60601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOX, YITZHOK ASST. 702 N 129th St, Suite 116 Omaha, NE 68154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS OTIS, STEPHEN 205 N. MICHIAN AVENUE, SUITE 4400 CHICAGO, IL 60601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS OTIS, STEPHEN 702 N. Michigan Avenue, Suite 116 Omaha, NE 68154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KATZ, JOSHUA 205 N. MICHIAN AVENUE, SUITE 4400 CHICAGO, IL 60601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KATZ, JOSHUA 501 BRICKELL KEY DRIVE, SUITE 205 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Stephen R. Otis Date: 4/11/07 Daytime Phone #: 312 932-1111	