

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000002168

Entity Name: GCP LAKESHORE TRS, INC.

**FILED**  
**Mar 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

840 SOUTH WAUKEGAN ROAD  
SUITE 222  
LAKE FOREST, IL 60045

**New Principal Place of Business:**

**Current Mailing Address:**

840 SOUTH WAUKEGAN ROAD  
SUITE 222  
LAKE FOREST, IL 60045

**New Mailing Address:**

FEI Number: 26-0329417

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GOLDMAN, JAMES R  
Address: 840 SOUTH WAUKEGAN ROAD, SUITE 222  
City-St-Zip: LAKE FOREST, IL 60045

Title: VPD  
Name: LENTZ, DAVID B  
Address: 840 SOUTH WAUKEGAN ROAD, SUITE 222  
City-St-Zip: LAKE FOREST, IL 60045

Title: STD  
Name: TARKINGTON, MICHAEL A  
Address: 840 SOUTH WAUKEGAN ROAD, SUITE 222  
City-St-Zip: LAKE FOREST, IL 60045

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: JAMES R. GOLDMAN

P

03/25/2012

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

\_\_\_\_\_  
Date