2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F07000003730

1. Entity Name

1865 LINTON & 1495 SPRING HARBOR, INC.



Principal Place of Business

101 CALIFORNIA STREET

26TH FLOOR

SAN FRANCISCO, CA 94111-5853

Mailing Address

875 N MICHIGAN AVENUE

41ST FLOOR

CHICAGO, IL 60611-1901

FILED Jan 25, 2008 8:00 am Secretary of State

01-25-2008 90037 037 ***150.00



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4. FEI Number

CR2E034 (11/05)

26-0571108

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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No Chg-P

 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. 								
SIGNATURE								
Sign	alure, typed or printed name of registered agent and title	l applicable.	(NOTE: Registered Ag	jent signature	required when reinstating)	-	DATE	
	IOW!!! FEE IS \$150.00 1, 2008 Fee will be \$550.00		ampaign Financin Contribution.	1g	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					· .	1 : 4 7		
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10.	OFFICERS AND DIRECTORS
TITLE	PD
NAME	MCAULIFFE, BRIAN E
STREET ADDRESS	875 NORTH MICHIGAN AVENUE, 41ST FLOOR
CITY-ST-ZIP	CHICAGO, IL 606111901
TITLE	V
NAME	BONEHAM, PAMELA
STREET ADDRESS	875 NORTH MICHIGAN AVENUE, 41ST FLOOR
CITY-ST-ZIP ,	CHICAGO, IL 606111901
TITLE	VS
NAME	MCCLINTOCK, SUSAN E
STREET ADDRESS	875 NORTH MICHIGAN AVENUE, 41ST FLOOR
CITY-ST-ZIP	CHICAGO, IL 606111901
TITLE	V A Sanda
NAME	BLAISING: ANGELA C
STREET ADDRESS	875 NORTH MICHIGAN AVENUE, 41ST FLOOR
CITY-ST-ZIP	CHICAGO, IL:606111901
TITLE	T g
, NAME	CASELLINI, MARLENA M
STREET ADDRESS	101 CALIFORNIA STREET, 26TH FLOOR
CITY-ST-ZIP	SAN FRANCISCO, CA 941115853
TITLE	V
NAME	COOK, ROBERT J
STREET ADDRESS	
CITY-ST-ZIP	CHICAGO, IL: 606111901

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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. Mi Clumsusan e. McClintock, VP&SEC., 01/04/08, 312/266-9300