2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005166

PO BOX 366879

BONITA SPRINGS, FL 34136

Address:

City-St-Zip:

CAKEDOOK DEALTY INC

FILED Apr 07, 2009 Secretary of State

Entity Name: OAKBROOK REALTY, INC.					
Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
1600 E MAIN ST ST. CHARLES, IL 60174			1600 E MAIN ST SUITE B ST. CHARLES, IL		
Current M	lailing Addres	s:	New Mailing Add	New Mailing Address:	
1600 E MAIN ST ST. CHARLES, IL 60174			1600 E MAIN ST SUITE B ST. CHARLES, IL		
FEI Number:	36-3913846	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US			24880 BURNT PIN BUILDING 8	DEWHIRST, NED E 24880 BURNT PINE DRIVE BUILDING 8 BONITA SPRINGS, FL 34134 US	
	named entity s e of Florida.	submits this statement for the pu	rpose of changing its regis	tered office or registered agent, or both,	
SIGNATURE: NED E. DEWHIRST				04/07/2009	
	Electron	ic Signature of Registered Agen	t	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD () WELTY, RODN 1600 E MAIN S' SAINT CHARLE	T STE B	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () MCARDLE, DAV 4051 E MAIN S' ST. CHARLES,	Г	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () DEWHIRST, NE POB 366879 BONITA SPRIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V () DE SALVIO, AN	Delete DREW P	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RODNEY A. WELTY SD 04/07/2009