2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

E0200005400

CHICAGO IL 60606

2 N. RIVERSIDE PLAZA- STE 600



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90399 042 ***150 00

I. Entity Name O PROPERTIES, INC.	1 9000000		
Principal Place of Business	Mailing Address C/O ANNE RAFELSON		

3. Mailing Address 2. Principa Place of Business c/o_ROBIN_SCHAPIRO c/o ROBIN SCHAPIRO Suite, Apt. #, etc. Suite, Apt. #, etc. 2 N. REVERSIDE PLAZA - STE. 600 2 N. RIVERSIDE PLAZA - STE. 600 City & State

2 N. RIVERSIDE PLAZA- STE 600

CHICAGO IL 60606



CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State 36-3787970 Not Applicable CHICAGO、IL のうのりず CHICAGO, IL \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required 60606 U.S.A. 60606 U.S.A. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES STREET **SUITE 105** Zip Code TALLAHASSEE FL 32301 City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State

make Oncor	I black to the transfer and the transfer					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME	PD ZELL, SAMUEL 2 N. RIVERSIDE PLAZA CHICAGO IL 60606	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PAOLUCCI, JOSEPH M. 2 N. RIVERSIDE PLAZA CHICAGO, IL 60606	☐ Change	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVA LIEBENTRITT, DONALD J 2 NORTH RIVERSIDE PLAZA CHICAGO IL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSISTANT SECRETARY McFARLAND, LUCILLE 2 N. RIVERSIDE PLAZA CHICAGO, IL 60606	☐ Change	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TINKLER, PHILIP 2 N RIVERSIDE PLAZA CHICAGO IL 60606	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TOURAS, GEORGE C 2 N RIVERSIDE PLAZA CHICAGO IL 60606	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAFELSON, ANNE 2 NORTH RIVERSIDE PLAZA CHICAGO IL	□XI Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY_ST_7IB		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

rerequired

Donald J. Liebentritt, V.P., Feb. 3, 2003 312-466-3380

Date