

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 09 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000974 (5)

1. Corporation Name

BRAUVIN REALTY ADVISORS IV, INC.

Principal Place of Business

150 S. WACKER DR.  
SUITE 3200  
CHICAGO IL 60606

Mailing Address

150 S. WACKER DR.  
SUITE 3200  
CHICAGO IL 60606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1994

4. FEI Number

36-3782782

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 30 North LaSalle Street

Suite, Apt. #, etc.

22 Suite 3100

City & State

23 Chicago, IL

Zip

24 60602

Country

25 Cook

2a. Mailing Address

26 30 North LaSalle Street

Suite, Apt. #, etc.

27 Suite 3100

City & State

28 Chicago, IL

Zip

29 60602

Country

30 Cook

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PCD  
STREET ADDRESS BRAULT, JEROME L  
CITY-ST-ZIP 150 S. WACKER DR.  
CHICAGO IL

TITLE ☐ DELETE

NAME VPS  
STREET ADDRESS BRAULT, JAMES L  
CITY-ST-ZIP 150 S. WACKER DR.  
CHICAGO IL

TITLE ☐ DELETE

NAME AYNESSAZIAN, B ALLEN  
STREET ADDRESS 150 S. WACKER DR., SUITE 3200  
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

30 N. LaSalle Street, Suite 3100  
Chicago, IL 60602

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

30 N. LaSalle Street, Suite 3100  
Chicago, IL 60602

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

30 N. LaSalle Street, Suite 3100  
Chicago, IL 60602

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1/28/98

(312) 443-0932

CR2E034 (1097)