## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F94000002076

1. Entity Name

EAGLE RIDGE MALL, INC.



Principal Place of Business

110 N WACKER CHICAGO, IL 60606 US

Mailing Address

110 N WACKER CHICAGO, IL 60606

US

## FILED May 04, 2007 8:00 am Secretary of State

05-04-2007 90065 023 \*\*\*150.00



04172007

No Cha-P

CR2E034 (11/05)

4. FEI Number 42-1420675 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST SUITE 105

TALLAHASSEE, FL 32301

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
The state of the s				
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			g \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		
TITLÉ	PD			
NAME	MICHAELS, ROBERT			
STREET ADDRESS	110 N WACKER			
CITY-ST-ZIP	CHICAGO, IL 60606			
TITLE	DVPT			
NAME	FREIBAUM, BERNARD			
STREET ADDRESS	110 N WACKER			
CITY-ST-ZIP	CHICAGO, IL 60606			
TITLE	DCEO			
NAME	BUCKSBAUM			
STREET ADDRESS	110 N WACKER	1		
CITY-ST-ZIP	CHICAGO, IL 60606		DO	NOT WRITE
TITLE	S		INI *	THIS OBAGE
NAME	GERN, RONALD L.		iN	THIS SPACE
STREET ADDRESS	110 N. WACKER			
CITY-ST-ZIP	CHICAGO, IL 60606			
TITLE	<u></u>			
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		/2.00.00		
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
12. Thereby 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 gustee impowered 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 attacking not with an addisse, with all other like empowered.				