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

PROFIT **CORPORATION** ANNUAL REPORT

1**9**98

A. C. Transfer of



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400003982 (5)

**EQR-SPRINGS COLONY VISTAS, INC.** 

Principal Place of Business Mailing Address % ANN M. SCHNEIDER % ANN M. SCHNEIDER 2 N. RIVERSIDE PLAZA 2 N. RIVERSIDE PLAZA DO NOT WRITE IN THIS SPACE CHICAGO IL 60806 CHICAGO IL 60606 3. Date Incorporated or Qualified 08/01/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 39-3979689 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** THE PRENTICE-HALL CORPORATION SYSTEM, INC. Name 1201 HAYS ST., STE, 105 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 84 City 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 reinstaling) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Addition 1.1 TITLE ☐ Change **GREENBERG. ARTHUR A** NAME 1.2 NAME 2 N. RIVERSIDE PLAZA STREET ADDRESS 1.3 STREET ADDRESS CHICAGO IL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition LIEBENTRITT, DONALD J NAME 2.2 NAME 2 N. RIVERSIDE PLAZA STREET ADDRESS 2.3 STREET ADDRESS CHICAGO IL 60606 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition PHIPPS, JAMES M NAUF 3.2 NAME 2 N. RIVERSIDE PLAZA STREET ADDRESS 3.3 STREET ADDRESS CHICAGO IL 60606 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DECETE 4.1 TITLE Change Addition SCHNEIDER, ANN M NAME 4. 2 NAME **2** N. RIVERSIDE PLAZA STREET ADDRESS 4.3 STREET ADDRESS CHICAGO IL 60606 CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELETE Addition Change 5.1 TITLE KOSFELD. MARLENE C NAME 5.2 NAME 2 N. RIVERSIDE PLAZA STREET ADDRESS 5.3 STREET ADDRESS CHICAGO IL 60606 CITY-ST-ZIP 5.4 City-St-ZIP DELETE TITLE 6.1 TITLE Director X Addition STEVENS, STANLEY M Stonebraker, Kelly NAME 6.2 NAME

6.3 STREET ADDRESS

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 his receiver or trusted 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 or an attackineril with an address. APR 1 0 1000

2 N. Riverside Plaza

**FILED** 

Apr 20 1998 8:00am

Secretary of State

CR2E034

2 N. RIVERSIDE PLAZA

STREET ADDRESS