

2000 UNIFORM BUSINESS REPORT (UBR)

065210

DOCUMENT # F95000004429

1. Entity Name

CMD REIM II, INC.

Principal Place of Business

227 WEST MONROE
STE 3900
CHICAGO IL 60606

Mailing Address

227 WEST MONROE
STE 3900
CHICAGO IL 60606-5085

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-4019393

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KILGALLON, PAUL J
% CMD REALTY INVESTORS, INC.
899 W CYPRESS CREKK RD., STE 109
FT. LAUDERDALE FL 33309-2046

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City
Tallahassee

FL

Zip Code
32301

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.

SIGNATURE Deborah D. Skipper

Deborah D. Skipper
as its agent

2/18/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME ELLENBOGEN, STEVEN W
STREET ADDRESS 227 W. MONROE, STE 3900
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME SCHALLER, RICHARD G
STREET ADDRESS 227 W. MONROE, STE 3900
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD
NAME SELIG, RANDAL J
STREET ADDRESS 227 W. MONROE, STE 3900
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT
NAME BROSNAN, PETER G
STREET ADDRESS 227 W. MONROE, STE 3900
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME KILGALLON, PAUL
STREET ADDRESS 899 W CYPRESS CREEK ROAD #109
CITY-ST-ZIP FORT LAUDERDALE FL ☒ Delete

TITLE V
NAME Allen D. Aldridge
STREET ADDRESS 2500 Meridian Parkway, Suite 135
CITY-ST-ZIP Durham, North Carolina 27713 ☐ Change ☒ Addition

TITLE VAS
NAME HEJNA, DAVID T
STREET ADDRESS 227 W MONROE STREET #3900
CITY-ST-ZIP CHICAGO IL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Randal J. Selig

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randal J. Selig

1/27/2000

Date

(312) 726-3121

Daytime Phone #

FILED

00 FEB 18 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)