

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F95000004429

1. Entity Name
CMD REIM II, INC.



Principal Place of Business

303 W MADISON STREET
SUITE 1900
CHICAGO, IL 60606

Mailing Address

303 W MADISON STREET
SUITE 1900
CHICAGO, IL 60606



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2046

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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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WOOD PRINCE, WILLIAM N
STREET ADDRESS 303 W MADISON STE 1900
CITY-ST-ZIP CHICAGO, IL 60606

TITLE VPD
NAME HIGHLEY, RANDALL M
STREET ADDRESS 303 W MADISON STE 1900
CITY-ST-ZIP CHICAGO, IL 60606

TITLE S
NAME RICHARDSON, SARAH A
STREET ADDRESS 303 W MADISON STE 1900
CITY-ST-ZIP CHICAGO, IL 60606

TITLE D
NAME PRINCE, FREDERICK H
STREET ADDRESS 816 CONNECTICUT AVE NW
CITY-ST-ZIP WASHINGTON, DC 20006

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

UG00000393891
02/01/06-80031-006 150.00

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IN THIS SPACE**

12. I hereby 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 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: Randall Highley 1-6-06 312-419-9500