

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # F95000005953

1. Entity Name
GGP/HOMART, INC.



Principal Place of Business

110 N. WACKER
CHICAGO, IL 60606

Mailing Address

110 N. WACKER
CHICAGO, IL 60606

DO NOT WRITE IN THIS SPACE



02162005 No Chg-P CR2E034 (10/03)

4. FEI Number
36-4032784

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

**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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DC
NAME	BUCKSBAUM, MATTHEW D
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	DPCO
NAME	MICHAELS, ROBERT A
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	DCEO
NAME	BUCKSBAUM, JOHN
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	VPCF
NAME	FREIBAUM, BERNARD
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	S
NAME	EISENBERG, MARSHALL
STREET ADDRESS	2 N. LASALLE STREET, SUITE 2200
CITY-ST-ZIP	CHICAGO, IL 60602
TITLE	AS
NAME	WILLIAMS, CAROL A
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BERNARD FREIBAUM 2-22-05 312-960-5205
Date Daytime Phone #