

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2006 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
---	---



01312006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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.

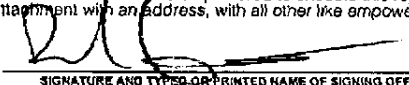
SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	UN0000450918 03/10/06-80024-015 150.00
---	---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC BUCKSBAUM, MATTHEW D 110 N. WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO MICHAELS, ROBERT A 110 N. WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO BUCKSBAUM, JOHN 110 N. WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCF FREIBAU, BERNARD 110 N. WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EISENBERG, MARSHALL 2 N. LASALLE STREET, SUITE 2200 CHICAGO, IL 60602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WILLIAMS, CAROL A 110 N. WACKER 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 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:  **BERNARD FREIBAU** 2-22-06 312-960-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #