

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 17, 2007 8:00 am
Secretary of State

05-17-2007 90036 045 ***150.00

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

40115506



04192007 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

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, 2007 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	GERN, RONALD L.
STREET ADDRESS	110 NORTH WACKER DRIVE
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	AS
NAME	WILLIAMS, CAROL A
STREET ADDRESS	110 N. WACKER
CITY-ST-ZIP	CHICAGO, IL 60606

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/07 312-960-5000