

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F95000006039**

1. Entity Name  
GGP-PEMBROKE LAKES, INC.



Principal Place of Business  
110 N WACKER  
CHICAGO, IL 60606 US

Mailing Address  
110 N WACKER  
CHICAGO, IL 60606 US



04062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
36-4064302

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000146093  
05/03/04-80053-003 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVT FREIBAUM, BERNARD 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	DP MICHAELS, ROBERT A 110 N WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS BAYER, JOEL 110 N WACKER CHICAGO, IL 60606
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S EISENBERG, MARSHALL E 2 N. LASALLE, STE. 2100 CHICAGO, IL 60602
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Bernard Freibaum  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-04 312-960-5205  
Date Daytime Phone #