

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90080 031 ***150.00

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

40112220



04192007 No Chg-P CR2E034 (11/05)

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

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	DVT
NAME	FREIBAUM, BERNARD
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	DP
NAME	MICHAELS, ROBERT A
STREET ADDRESS	110 N WACKER
CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	V
NAME	SCHLEMMER, JEAN
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	
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 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

4/26/07

312-960-5000

Date

Daytime Phone #