

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # F96000001691

1. Entity Name
LIBERTY CAPITAL RESOURCES, INC.



Principal Place of Business
11 W MADISON ST
STE 110
OAK PARK, IL 60302 US

Mailing Address
11 WEST MADISON ST
OAK PARK, IL 60302 US

DO NOT WRITE IN THIS SPACE



03202007 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3904007	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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 NAME STREET ADDRESS CITY-ST-ZIP	S FITZPATRICK, EDWARD C 115 S. LASALLE STREET CHICAGO, IL 60603
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUNNING, MICHAEL 11 WEST MADISON STREET OAK PARK, IL 60302
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KELLY, MICHAEL E 11 WEST MADISON STREET OAK PARK, IL 60302
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, RONALD 28 W MADISON OAK PARK, IL 60302
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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04/24/07-80095-013 150.00

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: *Michael Dunning* **70**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/07 708 358-2073
Date Daytime Phone #