

2000 UNIFORM BUSINESS REPORT (UBR)

0552048

DOCUMENT # F96000002407

1. Entity Name

CMD SOUTHWEST INC.

FILED

00 MAR -7 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
227 WEST MONROE STREET
SUITE 3900
CHICAGO IL 60606
US

Mailing Address
227 WEST MONROE STREET
SUITE 3900
CHICAGO IL 60606-5085
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 36-3051321

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KILGALLON, PAUL J
% CMD REALTY INVESTORS, INC.
899 W. CYPRUS CREEK ROAD, SUITE 109
FORT LAUDERDALE FL 33309

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City Tallahassee FL Zip Code 32301

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.

SIGNATURE

BRIAN COURTNEY, ASST. V.P.

3/7/2000

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CP
NAME ELLENBOGEN, STEVEN
STREET ADDRESS 227 W. MONROE, STE. 3900
CITY-ST-ZIP CHICAGO IL 60606 ☐ Delete

TITLE P
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE C
NAME SCHALLER, RICHARD G
STREET ADDRESS 227 W. MONROE, STE. 3900
CITY-ST-ZIP CHICAGO IL 60606 ☐ Delete

TITLE D/V
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
000003169760--0
-03/14/00--01116--019
****150.00 ****150.00

TITLE DS
NAME SELIG, RANDAL J
STREET ADDRESS 227 W. MONROE, STE. 3900
CITY-ST-ZIP CHICAGO IL 60606 ☐ Delete

TITLE D/V/S
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE VAS
NAME HEJNA, DAVID T
STREET ADDRESS 227 W. MONROE, STE. 3900
CITY-ST-ZIP CHICAGO IL 60606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
LS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with another I am empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randal J. Selig

2/23/2000

(312) 726-3121

Date

Daytime Phone #

CR2E034 (9/99)