

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006251

FILED  
Apr 07, 2007  
Secretary of State

Entity Name: MHC TT, INC.

## Current Principal Place of Business:

TWO N RIVERSIDE PLAZA, STE 800  
CHICAGO, IL 60606

## New Principal Place of Business:

## Current Mailing Address:

TWO N RIVERSIDE PLAZA, STE 800  
CHICAGO, IL 60606

## New Mailing Address:

FEI Number: 75-2138671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORP. SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HENEGHAN, THOMAS P  
Address: TWO N RIVERSIDE PLAZA, #800  
City-St-Zip: CHICAGO, IL 60606

Title: DEVP ( ) Delete  
Name: KELLEHER, ELLEN  
Address: TWO N RIVERSIDE PLAZA #800  
City-St-Zip: CHICAGO, IL 60606

Title: EVP ( ) Delete  
Name: BERMAN, MICHAEL  
Address: TWO N RIVERSIDE PLAZA, #800  
City-St-Zip: CHICAGO, IL 60606

Title: VS ( ) Delete  
Name: FELL, DAVID W  
Address: TWO N RIVERSIDE PLAZA #800  
City-St-Zip: CHICAGO, IL 60606

Title: V ( ) Delete  
Name: NADER, MARGUERITE  
Address: TWO N RIVERSIDE PLAZA #800  
City-St-Zip: CHICAGO, IL 60606

Title: VT ( ) Delete  
Name: SEAVEY, PAUL  
Address: TWO N RIVERSIDE PLAZA #800  
City-St-Zip: CHICAGO, IL 60606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID FELL

VS

04/07/2007

Electronic Signature of Signing Officer or Director

Date