

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F97000006338

FILED
Sep 13, 2007
Secretary of State**Entity Name:** HOMETOWN AMERICA MANAGEMENT CORP.**Current Principal Place of Business:**150 N WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606 US**New Principal Place of Business:****Current Mailing Address:**150 N WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606 US**New Mailing Address:****FEI Number:** 36-4215347**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLINE JR., RICHARD G
Address: 150 N WACKER DR STE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: D () Delete
Name: MCCABE, BARRY C
Address: 150 N WACKER DR STE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: SVP () Delete
Name: BRAUN, STEPHEN H
Address: 150 N WACKER DR STE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: P () Delete
Name: O'BERRY, GREGORY A
Address: 150 N. WACKER DR, STE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: VP,T () Delete
Name: CURATOLO, THOMAS
Address: 150 N. WACKER DRIVE, STE 2800
City-St-Zip: CHICAGO, IL 60606 US

Title: SVP () Delete
Name: MCCABE, BARRY C
Address: 150 N. WACKER DRIVE, STE 2800
City-St-Zip: CHICAGO, IL 60606 US

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: VPTS (X) Change () Addition
Name: CURATOLO, THOMAS
Address: 150 N. WACKER DRIVE, STE 2800
City-St-Zip: CHICAGO, IL 60606 US

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

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS CURATOLO, SECRETARY

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09/13/2007

Electronic Signature of Signing Officer or Director

Date