


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000002286
 1. Entity Name
 INLAND REAL ESTATE ACQUISITIONS, INC.



Principal Place of Business 2901 BUTTERFIELD RD. OAK BROOK, IL 60523	Mailing Address 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
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DO NOT WRITE IN THIS SPACE



01312005 No Chg-P CR2E034 (10/03)

4. FEI Number 36-3614035	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	CP COSENZA, G. JOSEPH 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST KREMIN, ALAN F 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP SANDERS, STEVEN D 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP QUILICI, LOUIS 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAUTZ, KAREN 2901 BUTTERFIELD RD. OAK BROOK, IL 60523
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDERSON-COX, SHARON M 2901 BUTTERFIELD RD OAK BROOK, IL 60523

100000243499
 02/25/05-80043-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: Alan F. Kremin Alan F. Kremin, Secretary/Treasurer Date: 2/18/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(630)
218-8000
Daytime Phone #