

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90028 007 ***150.00

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1. Entity Name
SDC LATITUDES AT THE MOORS, INC.



Principal Place of Business
**ATTN: S. MCCLINTOCK
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 60611-1901**

Mailing Address
**ATTN: S. MCCLINTOCK
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 60611-1901**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062006

Chg-P

CR2E034 (11/05)

4. FEI Number

94-3340629

Applied For

Not Applicable

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
COOK, ROBERT J
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 606111901** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**McClintock, Susan E. - AVP & S
875 N. Michigan Ave, 41st Flr.
Chicago, IL 606111901** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
KING, DONALD A JR.
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 606111901** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Campos, Darrell S. - VP
875 N. Michigan Ave, 41st Flr.
Chicago, IL 606111901** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
HUGHES, CHRISTOPHER L
875 NORTH MICHIGAN AVE., 41ST FLOOR
CHICAGO, IL 606111901** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Melkus, Paul A. - VP
875 N. Michigan Ave, 41st Flr.
Chicago, IL 606111910** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
FERKULL, PAULA M
875 NORTH MICHIGAN AVE. 41ST FLOOR
CHICAGO, IL 606111901** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
CASSELLINI, MARLENA M
101 CALIFORNIA ST 26 FLOOR
SAN FRANCISCO, CA 941115853** ☐ 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

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:

Susan E. McClintock
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #