

2000 UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # F99000006497

1. Entity Name

CHART HOUSE ACQUISITION, INC.

FILED

00 JUN 14 PM 1:39

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address

640 N. LASALLE ST., STE. 295

CHICAGO, ILLINOIS 60610

SAME

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-4279234

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES, INC.

3953 W.W. KELLEY RD.

TALLAHASSEE, FL 32311

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.

SIGNATURE

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 ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT/CEO
THOMAS J. WALTERS
640 N. LASALLE ST., STE. 295
CHICAGO, ILLINOIS 60610

TITLE ☒ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
SUSAN OBUCHOWSKI
2 NORTH RIVERSIDE PLAZA
CHICAGO, ILLINOIS 60606

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
LAURA MONDROWSKI
640 N. LASALLE ST., STE. 295
CHICAGO, ILLINOIS 60610

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE: Laura Mondrowski Laura Mondrowski, Secretary 6/12/00 (312) 266-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE

CR2E034 (9/99)

ACCOUNT FILING COVER SHEET

2012

ACCOUNT NUMBER: FCA000000005

REFERENCE: 20 22595-2
(Sub Account)

DATE: 6-14

REQUESTOR NAME: Lexis Document Services

ADDRESS:

TELEPHONE: () () ext ()

CONTACT NAME:

CORPORATION NAME: Chart House Acquisition, Inc.

DOCUMENT NUMBER: F99-6497
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

CERTIFIED COPY (1-9)

CERTIFICATE OF STATUS (1-9)

PLAIN STAMPED COPY

☐ Call When Ready
☐ Walk In
☐ Mail Out

☐ Call if Problem
☐ Will Wait

☐ After 4:30
☐ Pick Up

RECEIVED
00 JUN 14 AM 11:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA