2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 25, 2006 08:00 AN Secretary of State

DOCUMENT #	M0400000	1666

1. Entity Name
SFP PATRIOT VILLAGE LLC



Principal Place of Business

3190 DOOLITTLE DRIVE NORTHBROOK, IL 60062 Mailing Address

3190 DOOLITTLE DRIVE NORTHBROOK, IL 60062



DO NOT WRITE IN THIS SPACE

04202006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 36-3926824 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

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8. The above the obligat	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered	diffice or registered agent, or bo	th, in the State of Flo	ırida. I am familiar w	ith, and accept
SIGNATURE_						
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signal are required when reinstating)		DATE		
Fi D	iling Fee is \$50.00 tue by May 1, 2006			Hāāāāā		
9.	MANAGING MEMBERS/MANAGERS			05/06/06-	1531,729 -80057-004	en na
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHWARTZ FAMIL LIMITED PARTNERSHIP 3190 DOOLITTLE DRIVE NORTHBROOK, IL 60062		÷ -=	ans agrado		<i>30,00</i>
TITLE Name						. 4:

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CHY-ST-ZIP

STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OF FRINTED HAME OF SIGNING MANAGING MEMBUR, OR AUTHORIZED REPRESENTATIVE
GENERAL PARCHIER

4-20-06

847/753-6600

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