

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90030 046 \*\*\*\*50.00

**DOCUMENT # M04000002818**

1. Entity Name  
CRMI, LLC



Principal Place of Business

71 S WACKER DR  
STE 900  
CHICAGO, IL 60606 US

Mailing Address

71 S WACKER DR  
STE 900  
CHICAGO, IL 60606 US

**DO NOT WRITE IN THIS SPACE**

01122006No Chg-LLC

CR2E083 (11/05)

4. FEI Number

~~36-3572949~~

22-3901771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CC-DEVELOPMENT GROUP, INC.
STREET ADDRESS	71 SOUTH WACKER DR STE 900
CITY-ST-ZIP	CHICAGO, IL 60606

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:** \_\_\_\_\_

Stephanie Fields

3/20/06

312-803-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ATTACHMENT

60036605

X

 **IRS** DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
HOLTSVILLE NY 11742-9003

#M0400002818

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|||||



CRMI LLC  
CC DEVELOPMENT GROUP INC SOLE MBR  
200 W MADISON ST STE 3700  
CHICAGO IL 60606

004271

Date of this notice: 07-08-2004

Employer Identification Number:  
22-3901771

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 22-3901771. This EIN will identify your business account, tax returns, and documents even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible, you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, it may cause a delay in processing and may result in incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

#### IMPORTANT REMINDERS:

- \* Keep a copy of this notice in your permanent records.
- \* Use this EIN and your name exactly as they appear above on all your federal tax forms.
- \* Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.

575E

ATTACHMENT

07-08-2004 CRMI 0 0133547590 SS-4

60036605

#M04000002818



004271

CP 575 E (Rev. 1-2004)

CP 575 E

0133547590

DATE OF THIS NOTICE: 07-08-2004  
EMPLOYER IDENTIFICATION NUMBER: 22-3901771  
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE  
HOLTSVILLE NY 11742-9003  
[Barcode]

CRMI LLC  
CC DEVELOPMENT GROUP INC SOLE MBR  
200 W MADISON ST STE 3700  
CHICAGO IL 60606