

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90198 001 ****55.00

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01252007 Chg-LLC CR2E083 (12/06)

DOCUMENT # M06000001437 1. Entity Name ALCO FLORIDA HOLDINGS, LLC					
Principal Place of Business 5317 WEST CULLON AVENUE CHICAGO, IL 60641			Mailing Address 5317 WEST CULLON AVENUE CHICAGO, IL 60641		
2. Principal Place of Business - No P.O. Box # 5317 W. CULLON AVE		3. Mailing Address 5317 W CULLON AVE			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Chicago IL		City & State Chicago, IL		4. FEI Number 31-8306332	
Zip 60641		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HEISE, RICHARD A ESQ 5317 WEST CULLON AVENUE CHICAGO, IL 60641		<input type="checkbox"/> Delete		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Delete		
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: <i>Richard A. Heise</i> Richard A. Heise, Sr.		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 1-31-07		Daytime Phone # 773-205-0740