## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 07, 2005 08:00 AM Secretary of State DOCUMENT # M99000000862 1. Entity Name UNIVERSITY TOWERS APARTMENTS, L.L.C. Principal Place of Business Mailing Address 900 N. MICHIGAN AVENUE 900 N. MICHIGAN AVENUE 1450 1450 CHICAGO, IL 60611 US CHICAGO, IL 60611 01142005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 38-3472577 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 reinstaling) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGRM TITLE UNIVERSITY TOWERS MANAGER, L.L.C. STREET ADDRESS 900 N. MICHIGAN AVENUE CITY-ST-ZIP CHICAGO, IL 60611 \_\_\_U00000292714 04/07/05-80083-003 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath; 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Craig Caffarelli, Authorized Representative 01/14/05 (312)

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

Daytime Phone # 2402