2001 UNIFORM BUSINESS REPORT (UBR)

2001	UNIFO	RM BUSIN	IESS REPO	RT	(UBI	R)			rtes, sign d		0027757
DOCU					FILED			9			
DOCUMENT # M9900001499 1. Entity Name HSA-LM, LLC								OIMAY-I PM	5.10		Ą
•											
Principal Place of Business Mailing Address								SECRETARY OF STATE TALLAHASSEE, FLORIDA			
C/O HSA COMMERCIAL. INC. 180 N. WACKER DR., STE 500 CHICAGO IL 60606 CHICAGO IL 60606 CHICAGO IL 60606											
2. Principal P	Place of Business	3	3. Mailing Address								
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				•
· City & State			City & State			4. FEI N	36-4311669	 +	pplied For ot Applicable		
Zip	Cour	ntry	Zip	Count	try		5. Certii	ficate of Status Desired	\$5.00 Add Fee Require		
	6. Name and A	dress of Current Reg	istered Agent		Nome		7. Name	and Address of New Register	red Agent		
LEXIS DO	CUMENT SERVICI	ES INC.			Name Street A	Address (P.	O. Box N	umber is Not Acceptable)			
	/. Kelley RD. Ssee Fl 32311										
INLLAHIN	JOEL 12 J2011		·		City		<u> </u>		FL Zip Cod	e	
8. The above	named entity submi	ts this statement for the	purpose of changing its	gistere	d office o	r registered	agent, o	or both, in the State of Florida.	h:		
SIGNATURE .	Constitute hand or printed	name of registered agent and tit	le if englicable (NOTE	Penisterer	Anent signat	ture required wi	hen reinstati	na) D	ATE		
	5-ghattire, typed or printed	mane or registered agent and at		1000				40000427	2134-	6	
			FILE NO Make Check Pa	1 . 9	₹ 1	-	State	-05/18/01- *****50.0	-011310 0 *****5	12 0.00	
9. MANAGING MEMBERS/MEMBERS					- 11			ADDITIONS/CHAN	IGES		
TITLE NAME	MGRM SHAFFER, JOHN	I E	☐ Delete	TITLE					☐ Change	☐ Addition	3 (11/00)
STREET ADDRESS CITY-ST-ZIP	180 N. WACKER CHICAGO IL 606				ET ADDRESS ST-ZIP						CR2E083 (1
TITLE NAME	MGRM SMIETANA, ROB	ert e	Delete	TITLE			!		☐ Change	☐ Addition	5
STREET ADDRESS CITY-ST-ZIP	180 N. WACKER CHICAGO IL 606	DR., STE 500	المحمد الله		ET ADDRESS - St-Zip		- :-	a managara na mana			
TITLE	MGRM		☐ Delete	TITLE		·		· Clabar	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	TINSKY, STEPHI 180 N. WACKER CHICAGO IL 606	DR., STE 500		STREE	- Et address -st-zip	וויח.	51E	y, Stephen I.		i	
TITLE	011107100 12 001		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS				STREE	- et adoress -st-zip		,				
CITY-ST-ZIP TITLE			□ Deleté '	TITLE			:		Change	☐ Addition	
NAME Street address					et address						
CITY-ST-ZIP LITLE	_		☐ Delete	CITY-	ST-ZIP	<u> </u>			☐ Change	Addition	
NAME STREET ADDRESS		11	1/.	NAME STREE	: E t addres s :						
CITY-ST-ZIP			filing does not good fit if	. J	ST-ZIP	stad in Cart	ion 110 1	27/21/i) Elorido Statistos I fical-	or portify that the 1	oformation	
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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MAN. GER, OR AUTHORIZED REPRESENTATIVE