

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P09231 1. Entity Name MESIROW REAL ESTATE INVESTMENTS, INC.	
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Principal Place of Business 350 N. CLARK 2ND FL J MART CHICAGO, IL 60610-1796 US	Mailing Address 350 N. CLARK 2ND FLR JMART CHICAGO, IL 60610-1796 US
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01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-2945262	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

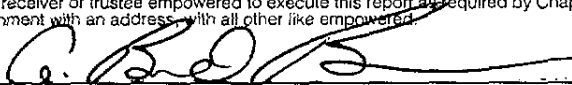
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	M LEVIN, GERALD J. 321 N. CLARK CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAS COHEN, GARRY W. 321 N. CLARK CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, RICHARD S 321 N. CLARK CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO PASKVAN, KRISTIE P 321 N CLARK ST CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TYREE, JAMES C 350 NORTH CLARK STREET CHICAGO, IL 60610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMD BUSSCHER, A B 321 N CLARK ST CHICAGO, IL 60610

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01/26/05-80093-005 300.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
A. Busscher, Secretary

1-20-05 (312) 595-6000
Date Daytime Phone #