2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005
Secretary of State

DOCUMENT# P21841

Entity Name: HO. LAKELAND MALL INVESTMENT CO.

Current Principal Place of Business:

3333 BEVERLY RD
HOFFMAN ESTATES, IL 60179 US

New Principal Place of Business:

Current Mailing Address:

3333 BEVERLY RD
768TAX, B2-130B
HOFFMAN ESTATES, IL 60179 US

New Mailing Address:

FEI Number: 36-3478573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WALROD, DOUGLAS
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: VD ( ) Delete
Name: TERRELL, JAMES
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: S ( ) Delete
Name: HANES-DOUID, APRIL
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: T ( ) Delete
Name: TERRELL, JAMES
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: ASD ( ) Delete
Name: GOEBEL, SOFIA
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: HANES-DOWD, APRIL
Address: 3333 BEVERLY RD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: APRIL HANES-DOWD S 03/22/2005

Electronic Signature of Signing Officer or Director Date