

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

1995 MAY -1 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P32824

P31289

1. Corporation Name

KENDALL KEYSTONE PROPERTIES, INC.

Principal Place of Business

**ONE FIRST NATIONAL PLAZA, 19TH FLOOR
CHICAGO IL 60670-7308**

Mailing Address

**ONE FIRST NATIONAL PLAZA, 19TH FLOOR
CHICAGO IL 60670-7308**

300001492673

-05/17/95--01183--024

******200.00 ****200.00**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/11/1990

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Country

30

4. FEI Number

36-3714528

Applied

☐ Not App

5. Certificate of Status Desired

☐

\$8.75 Additl
Fee Require

6. Election Campaign Financing

☐

\$5.00 May
Added to Fee

8. This corporation has liability for intangible tax under S. 199.02
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of Now Registered Agent

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 City

FL

65

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and his/her application

(NOTE: Registered Agent signature is required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

MALEY, JAMES J.

ONE FIRST NAT. PLAZA

CHICAGO IL

VD

DIBERNARDO, RICHARD J

ONE FIRST NAT. PLAZA

CHICAGO IL

S

HABICHT, PATRICIA T.

ONE FIRST NAT. PLAZA

CHICAGO IL

T

ROBERTS, WILLIAM J.

ONE N. DEARBORN, 14TH FL

CHICAGO IL

VD

MCGEE, PHILLIP E.

ONE FIRST NAT. PLAZA

CHICAGO IL

AT

DONOVAN, JAMES E

ONE FIRST NAT PLAZA

CHICAGO IL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made orally; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James E. Donovan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James E. Donovan

4-28-95 (312) 467-8252

Date

Daytime Phone #