## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P32857

(5)

MESIROW REALTY MANAGEMENT, INC.

**FILED** 

May 09 1997 8:00am

Secretary of State

	hace of Business RK STREET L 60610	Mailing Address 350 N. CLARK STREET CHICAGO IL 60810-4712	350 N. CLARK STREET						
					Date Incorporated or Quality     02/19/1991	J	ate of Last F 29/1996	leport	
2. Principa	al Place of Business	2a. Mailing Address	**********		4. FEI Number			pplied For	
26					36-3468732		<del></del>	ot Applicable	
		Suite, Apt. #, etc.	Apt. #, etc.		5. Certificate of Status Desire	d 🔲		Additional equired	
22 Oity & S	State State	City & State	-,		6. Election Campaign Financi	na		May Be	
23		28			Trust Fund Contribution			to Fees	
Zip	Country	Zip	Country		8. This corporation has liabilit			i. 199.032,	
24	25 9. Name and Address of Curre	nt Registered Agent	30		Florida Statutes  10. Name and Address of Ne	Yes Yes			
		iir nadistaran Watir	81	Name	IV. Hallie Bird Address Of He	w uphinipipi	Whalif		
	T CORPORATION SYSTEM		82			······································			
1200 S. PINE ISLAND ROAD PLANTATION FL 33324				Street Add	ress (P.O. Box Number is Not Acc	eptable)			
r	ENTIATION PE 00024		83		<del></del>				
			][		····, ········, ·······, ·········		<u></u>		
			84	City		FL	<b>85</b> Zip	Code	
11. Pursur	and to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the above	-named cor	poration submits this statement for		f changing i	ts registered	
office -	ant to the provisions of Sections 607.050 or registered agent, or both, in the State I am familiar with, and accept the oblig	e of Florida. Such change was a sations of Section 607 0505. Flo	authorized by	the corpora	ition's board of directors. I hereby	accept the app	pointment as	registered	
		Table 1 Control of the Party of the	inda bididies	•					
SIGNATUR	<ol> <li>Signature typical or printed name of registered ag</li> </ol>	ent and tipe if applicable INOT	Registered Age	nt signature requi	fred when reinstating)	DATE			
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AN	DIRECTOR	RS IN 12	
Tale	MP	☐ DELETE	1.1 TITLE	7	1)		Change	Addition	
NAME	COHEN, GARRY W.		1.2 NAME	<b>.</b> .			,		
STREET ADDRE			1.3 STREET	ADDRESS					
CHY - \$1 - 7IP	CHICAGO IL		1.4 CITY-S	(-ZIP					
2005	D	☐ DELETE	2.1 TITLE				Change	Addition	
NAME	YOUNG, BRUCE J		2.2 NAME						
STREET ACORÉ	, , , , , , , , , , , , , , , , , , , ,		2.3 STREET	ADDRESS					
COTY-ST ZIP	CHICAGO IL		2. 4 CITY - S	T - ZIP		····			
TULE	SD	DELETE	3.1 TITLE				Change	Addition	
NAMI	HANNENBERG, RUTH C.		3.2 NAME						
STREET ADDRE			33 STREET	ADDRESS					
CHTY - ST - 70P	CHICAGO IL		3.4 City-S	T-ZIP					
Alfte	AS	☐ DELETE	4.1 TITLE	-	yree, Eve M.		Change Change	Addition	
NAM:	SLUSARCZYK, EVE M.		4. 2 NAME	1	Aree' Eve M'				
STREET ADDRE			4.3 STREET	ADDRESS					
COTY-ST 7IP	CHICAGO IL		4.4 CITY-S	[ - ZIP	······································	,		<del></del>	
THIE	D	☐ DELETE	5.1 TITLE				Change	Addition	
MAME	TYREE, JAMES C		5.2 NAME	1					
STREET ADORE			5 3 STREET	l l					
CITY - ST - 7(5)	CHICAGO IL	T Beleas	54 City - S	r-zip	<del></del>		T &	2.000	
11,1		☐ DELETE	6.1 TITLE	1			Change	Addition	
NAM*			6.2 NAME						
STREET ADDRE	\$5		6.3 STREET						
€ TY+\$1-70P	[		6.4 CITY - S	i - ZIP					

14. I do 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 information information information information information of the same legal effect as if made under oath; that liable are officer or director of the corporation of 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 for on an attachment with an address.

buth C. Hannenberg