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FILED

06 APR 20 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2006 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # F03000005573					
1. Entity Name 1717 NINTH STREET, INC.					
Principal Place of Business 11 WEST MADISON STREET OAK PARK, IL 60302			Mailing Address 11 WEST MADISON STREET OAK PARK, IL 60302		
2. Principal Place of Business			3. Mailing Address		
Succ. Apt. #, etc.			Succ. Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 20-0350787			Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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: <i>Laura R. Dunlap</i>		Laura R. Dunlap as its agent		DATE: 4/20/06	
FILE NOW!! FEE IS \$300.00		In accordance with s. 807.193(2)(b), F.S., this corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MASON, MICHAEL D 11 WEST MADISON STREET OAK PARK, IL 60302	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Director Mason, Michael D. A Greenway Plaza, Suite 1100 Houston, TX 77046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LAFICO, JOSEPH 11 WEST MADISON STREET OAK PARK, IL 60302	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Lafico, Joseph A Greenway Plaza, Suite 1100 Houston, TX 77046	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARCINIAK, CLAUDIA 11 WEST MADISON STREET OAK PARK, IL 60302	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FITZPATRICK, EDWARD C 11 WEST MADISON STREET OAK PARK, IL 60302	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fitzpatrick, Edward C Secretary 111 S. Wacker Dr. - 45th Fl. Chicago, IL 60601	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 another like empowered.					
SIGNATURE: <i>Edward C. Fitzpatrick</i>		Edward C. Fitzpatrick Secretary		DATE: 4/13/2006 312-443-0272	

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K. Eckel APR 20 2006

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

CORPORATION REINSTATEMENT

1717 NINTH STREET, INC.

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