## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000004230

Entity Name: INLAND AMERICAN COMMUNITIES PARTNERS, INC.

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	ERFIELD RD DK, IL 605231	106			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	ERFIELD RD K, IL 605231	106			
FEI Number:	20-8960518	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324	ND ROAD			
The above in the State		submits this statement for the pur	pose of changing its regist	ered office or registered agent, or both,	
SIGNATUR					
		ic Signature of Registered Agent		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS	AND DIREC	TORS:	ADDITIONS/CHAI	NGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () FOUST, LORI J 2901 BUTTERF OAK BROOK, IL		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () LYNCH, CATHE 2901 BUTTERF OAK BROOK, IL	IELD RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MCUINNESS, TI 2901 BUTTERF OAK BROOK, IL	IELD RD	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	UTLEY, STEVE	WEST HWY #700	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	UTLEY, ROBER	IWEST HWY #700	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	ROBERTS, TRA	IWEST HWY #700	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SHERMAN WYMAN SECY 03/10/2009