

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F 97000005728

1. Entity Name
OAKS MALL GAINESVILLE II, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 110 N. WACKER DRIVE		3. Mailing Address 110 N. WACKER DRIVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State CHICAGO, IL		City & State CHICAGO, IL	
Zip 60606	Country USA	Zip 60606	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4186805	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name CORPORATION SERVECE COMPANY	
Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET	
City TALLAHASSEE	FL Zip Code 32301

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE DC	NAME MATTHEW BUCKSBAUM	TITLE	
STREET ADDRESS 110 N. WACKER DRIVE		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60606		CITY-ST-ZIP	
TITLE DCEO	NAME JOHN BUCKSBAUM	TITLE	
STREET ADDRESS 110 N. WACKER DRIVE		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60606		CITY-ST-ZIP	
TITLE DOCOO	NAME ROBERT A. MICHAELS	TITLE	
STREET ADDRESS 110 N. WACKER DRIVE		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60606		CITY-ST-ZIP	
TITLE DVPCFO	NAME BERNARD FREIBAUM	TITLE	DO NOT WRITE IN THIS SPACE
STREET ADDRESS 110 N. WACKER DRIVE		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60606		CITY-ST-ZIP	
TITLE VP	NAME JOEL BAYER	TITLE	
STREET ADDRESS 110 N. WACKER DRIVE		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60606		CITY-ST-ZIP	
TITLE S	NAME MARSHALL E. EISENBERG	TITLE	
STREET ADDRESS 2 N. LASALLE STE. 2200		STREET ADDRESS	
CITY-ST-ZIP CHICAGO, IL 60602		CITY-ST-ZIP	

13. I 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Bernard Freibaum** 4-17-02 (312) 960-5205

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)