Print Reset

FORM **BCA 9.05** (rev. Dec. 2003)
STATEMENT OF CANCELLATION OF NON-REISSUABLE SHARES
Business Corporation Act

Secretary of State
Department of Business Services
Springfield, IL 62756
217-782-6961
www.cyberdriveillinois.com

Remit payment in the form of a check or money order payable to Secretary of State.

_____ File #_____ Filing Fee: $5 Approved: _____

———— Submit in duplicate ———— Type or Print clearly in black ink ———— Do not write above this line ————

1. Corporate Name: _____

2. The Corporation has acquired and cancelled its own shares, and the Articles of Incorporation prohibit the re-issuance of such shares.

3. Number of shares cancelled and redemption or purchase price:

Class	Series	Par Value	Number of Shares Cancelled	Redemption or Purchase Price	Date of Cancellation

	BEFORE CANCELLATION				AFTER CANCELLATION			
	Class	Series	Par	Number	Class	Series	Par	Number
4. Number of authorized shares:								
5. Number of issued shares:								
6. Paid-in capital:	$_____				$_____			

7. The undersigned Corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct. All signatures must be in **BLACK INK**.

Dated _____ , _____ _____
Month & Day Year Exact Name of Corporation

_____
Any Authorized Officer's Signature

_____
Name and Title (type or print)

NOTE: This fo rm is applicable only where the Articles of Incorporation provide that shares redeemed or purchased shall be cancelled and shall not be re-issued. Upon such redemption and cancellation of shares, the paid-in capital of the Corporation is deemed to be reduced by that part of the paid-in capital which was represented by the shares so cancelled. The filing of this statement operates as an amendment to the Articles of Incorporation and reduces the number of shares of the class so redeemed which the Corporation is authori zed to issue by the number of shares so redeemed and cancelled.

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