

DEVELOPMENT PETITION FORM

DEVELOPMENT NAME (should be consistent with plat): _____

ADDRESS OF SUBJECT PROPERTY: 1508 Aurora Avenue, Naperville, IL 60540

PARCEL IDENTIFICATION NUMBER (P.I.N.) 07-23-110-020

I. PETITIONER: CAHST Naperville, LLC Attn: Russel Brenner

PETITIONER'S ADDRESS: 130 E. Randolph Street, Suite 2100

CITY: Chicago STATE: IL ZIP CODE: 60601

PHONE: (312) 248-2093 EMAIL ADDRESS: rbrenner@cahstreit.com

II. OWNER(S): CAHST Naperville, LLC Attn: Russel Brenner

OWNER'S ADDRESS: 130 E. Randolph Street, Suite 2100

CITY: Chicago, STATE: IL ZIP CODE: 60601

PHONE: (312) 248-2093 EMAIL ADDRESS: rbrenner@cahstreit.com

III. PRIMARY CONTACT (review comments sent to this contact): Will Kreuzer

RELATIONSHIP TO PETITIONER: Consultant

PHONE: (312) 914-9400 EMAIL ADDRESS: will@evolve-cre.com

IV. OTHER STAFF

NAME: Vince Rosanova, Rosanova & Whitaker, Ltd.

RELATIONSHIP TO PETITIONER: Zoning Attorney

PHONE: (630) 355-4600 EMAIL ADDRESS: vince@rw-attorneys.com

NAME: Jim Caneff, CEC, Inc.

RELATIONSHIP TO PETITIONER: Civil Engineer

PHONE: (630) 816-6027 EMAIL ADDRESS: jcaneff@cecinc.com

V. PROPOSED DEVELOPMENT

(check applicable and provide responses to corresponding exhibits on separate sheet)

PZC&CC Processes	<input type="checkbox"/> Annexation (Exhibit 3) <input type="checkbox"/> Rezoning (Exhibit 4) <input type="checkbox"/> Conditional Use (Exhibit 1) <input type="checkbox"/> Major Change to Conditional Use (Exhibit 1) <input type="checkbox"/> Planned Unit Development (PUD) (Exhibit 2) <input type="checkbox"/> Major Change to PUD (Exhibit 2) <input type="checkbox"/> Preliminary PUD Plat (Exhibit 2) <input type="checkbox"/> Preliminary/Final PUD Plat <input type="checkbox"/> PUD Deviation (Exhibit 6) <input type="checkbox"/> Zoning Variance (Exhibit 7) <input type="checkbox"/> Sign Variance (Exhibit 7) <input type="checkbox"/> Subdivision Variance to Section 7-4-4
CC Only Process	<input type="checkbox"/> Minor Change to Conditional Use (Exhibit 1) <input type="checkbox"/> Minor Change to PUD (Exhibit 2) <input checked="" type="checkbox"/> Deviation to Platted Setback (Exhibit 8) <input type="checkbox"/> Amendment to an Existing Annexation Agreement <input type="checkbox"/> Preliminary Subdivision Plat (creating new buildable lots) <input checked="" type="checkbox"/> Final Subdivision Plat (creating new buildable lots) <input type="checkbox"/> Preliminary/Final Subdivision Plat (creating new buildable lots) <input type="checkbox"/> Final PUD Plat (Exhibit 2) <input type="checkbox"/> Subdivision Deviation (Exhibit 8) <input type="checkbox"/> Plat of Right-of-Way Vacation
Administrative Review Administrative Review	<input type="checkbox"/> Administrative Subdivision Plat (no new buildable lots are being created) <input type="checkbox"/> Administrative Adjustment to Conditional Use <input type="checkbox"/> Administrative Adjustment to PUD <input type="checkbox"/> Plat of Easement Dedication/Vacation <input type="checkbox"/> Landscape Variance (Exhibit 5)
Other	<input type="checkbox"/> Please specify:

ACREAGE OF PROPERTY: 8.106 total Acres

DESCRIPTION OF PROPOSAL/USE (use a separate sheet if necessary)

Subdivide the property into three (3) parcels) and develop two buildings on the

vacant parcels.

VI. REQUIRED SCHOOL AND PARK DONATIONS (RESIDENTIAL DEVELOPMENT ONLY)

(per Section 7-3-5: Dedication of Park Lands and School Sites or for Payments or Fees in Lieu of)

Required School Donation will be met by:

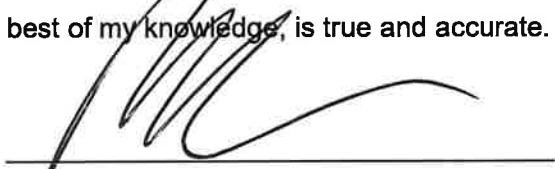
- ☐ Cash Donation (paid prior to plat recordation)
- ☐ Cash Donation (paid per permit basis prior to issuance of each building permit)
- ☐ Land Dedication

Required Park Donation will be met by:

- ☐ Cash Donation (paid prior to plat recordation)
- ☐ Cash Donation (paid per permit basis prior to issuance of each building permit)
- ☐ Land Dedication

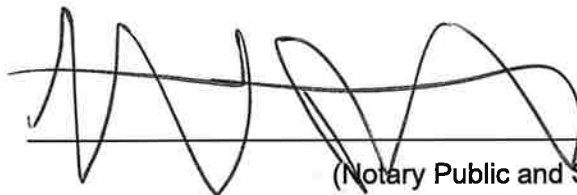
VII. PETITIONER'S SIGNATURE

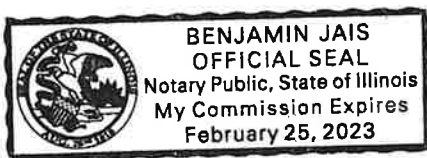
I, Russell Brenner (Petitioner's Printed Name and Title), being duly sworn, declare that I am duly authorized to make this Petition, and the above information, to the best of my knowledge, is true and accurate.


(Signature of Petitioner or authorized agent)

MARCH 16, 2022
(Date)

SUBSCRIBED AND SWORN TO before me this 16 day of MARCH, 20 22


(Notary Public and Seal)



VIII. OWNER'S AUTHORIZATION LETTER¹

I/we hereby certify that I/we am/are the owner(s) of the above described Subject Property. I/we am/are respectfully requesting processing and approval of the request(s) referenced in this Petition. I/we hereby authorize the Petitioner listed on this Petition to act on my/our behalf during the processing and presentation of this request(s).



(Signature of 1st Owner or authorized agent)

(Signature of 2nd Owner or authorized agent)

March 16, 2022

(Date)

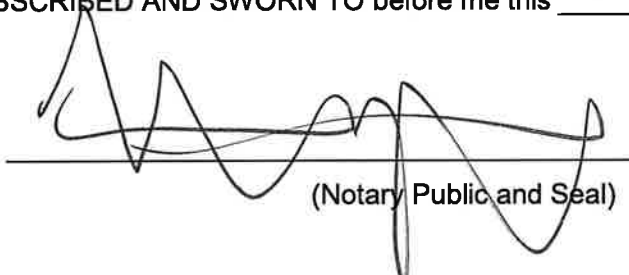
(Date)

Russell Brenner

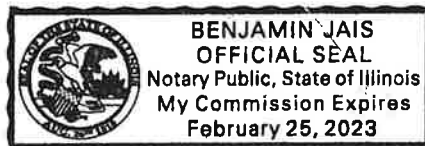
1st Owner's Printed Name and Title

2nd Owner Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 16 day of MARCH, 2022



(Notary Public and Seal)



¹ Please include additional pages if there are more than two owners.

CITY OF NAPERVILLE
PETITIONER/APPLICANT - DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

1. Petitioner: CAHST Naperville, LLC
 Address: 130 E. Randolph Street, Suite 2100
 Chicago, Illinois 60601

2. Nature of Benefit sought: Final Plat of Subdivision

3. Nature of Petitioner (select one):
 - a. Individual
 - b. Corporation
 - c. Land Trust/Trustee
 - d. Trust/Trustee
 - e. Partnership
 - f. Joint Venture
 - g. Limited Liability Corporation (LLC)
 - h. Sole Proprietorship

4. If Petitioner is an entity other than described in Section 3, briefly state the nature and characteristics of Petitioner:

n/a

5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):
 - **Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
 - **Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
 - **Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
 - **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
 - **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

SOLE MEMBER IS CAHST Holdings, LP, a Delaware limited partnership.

THE IL QUALIFICATION FOR CAHST NAPERVILLE, LLC IS ATTACHED

6. Name, address and capacity of person making this disclosure on behalf of the Petitioner:

Russell Brenner, President, CA Health & Science Trust

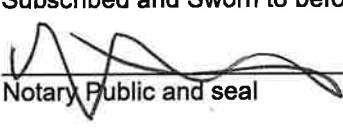
130 E. Randolph Street, Suite 2100, Chicago, Illinois 60601

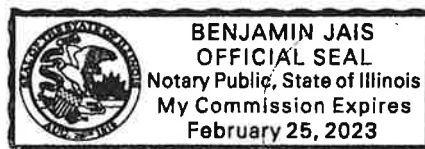
VERIFICATION

I, Russell Brenner (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: 

Subscribed and Sworn to before me this 16 day of March, 2022.


Notary Public and seal



CITY OF NAPERVILLE
PROPERTY OWNER - DISCLOSURE OF BENEFICIARIES

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Chicago, IL 60601
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3. Nature of Owner (select one):

a. Individual	e. Partnership
b. Corporation	f. Joint Venture
c. Land Trust/Trustee	g. Limited Liability Corporation (LLC)
d. Trust/Trustee	h. Sole Proprietorship
4. If Owner is an entity other than described in Section 3, briefly state the nature and characteristics of Owner:
n/a
5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):
 - a. **Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - b. **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
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 - e. **Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
 - f. **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
 - g. **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

SOLE MEMBER IS CAHST Holdings, LP, a Delaware limited partnership.

THE IL QUALIFICATION FOR CAHST NAPERVILLE, LLC IS ATTACHED

6. Name, address and capacity of person making this disclosure on behalf of the Owner:

Russell Brenner, President, CA Health & Science Trust

130 E. Randolph Street, Suite 2100, Chicago, Illinois 60601

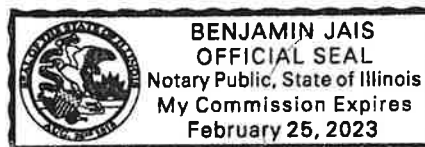
VERIFICATION

I, Russell Brenner (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Owner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: _____

Subscribed and Sworn to before me this 16 day of MARCH, 20 22.

Notary Public and seal





OFFICE OF THE SECRETARY OF STATE

JESSE WHITE-Secretary of State

10627346

AUGUST 11, 2021

ILLINOIS CORPORATION SERVICE C
801 ADLAI STEVENSON DRIVE
SPRINGFIELD, IL 62703-4261

RE CAHST NAPERVILLE, LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. WE EXTEND OUR BEST WISHES FOR SUCCESS WITH YOUR BUSINESS HERE.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS MONTH OF ADMISSION NEXT YEAR. FAILURE TO TIMELY FILE MAY RESULT IN A PENALTY AND REVOCATION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE REGISTERED OFFICE ADDRESS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

PUBLICATIONS/FORMS AND OTHER SERVICES ARE AVAILABLE ON OUR WEBSITE. VISIT WWW.CYBERDRIVEILLINOIS.COM TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE
ILLINOIS SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY DIVISION
217-524-8008

Form **LLC-45.5**

May 2018

Secretary of State

Department of Business Services

Limited Liability Division

501 S. Second St., Rm. 351

Springfield, IL 62756

217-524-8008

www.cyberdriveillinois.com

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State. If check is returned for any reason this filing will be void.

Illinois
Limited Liability Company Act
**Application for Admission to
Transact Business**

SUBMIT IN DUPLICATE

Type or print clearly.

Filing Fee: \$150

Penalty: \$

Approved: 

FILE #

This space for use by Secretary of State.

FILED

AUG 11 2021

JESSE WHITE
SECRETARY OF STATE1. Limited Liability Company name (see Note 1): CAHST Naperville, LLC

2. Assumed name: _____

(This item is only applicable if the company name in Item 1 is not available for use in Illinois, in which case form LLC 1.20 must be completed and submitted with this application.)

3. Jurisdiction of organization: Delaware4. Date of organization: July 21, 20215. Period of duration: Perpetual

(Enter perpetual unless there is a date of dissolution provided in the agreement, in which case enter that date.)

6. Address of the principal place of business: (P.O. Box alone or c/o is unacceptable.)

130 E. Randolph Street, Suite 2100

Number

Street

Suite #

Chicago, IL 60601

City

State

ZIP

7. Registered agent: Illinois Corporation Service Company

First Name

Middle Name

Last Name

Registered office: 801 Adlai Stevenson Drive

(P.O. Box alone or c/o is unacceptable.)

Number

Street

Suite #

Springfield

City

IL62703

ZIP

Note: The registered agent must reside in Illinois. If the agent is a business entity, it must be authorized to act as agent in this state.

8. If applicable, date on which company first conducted business in Illinois: _____

(continued on back)

9. Purpose(s) for which the company is organized and proposes to conduct business in Illinois (see Note 2):

10. The Limited Liability Company: (check one)

11. List names and business addresses of all managers and any member with the authority of manager:

Note 2: A professional limited liability company must state the specific professional service or related professional services to be rendered by the professional limited liability company.