

2000 UNIFORM BUSINESS REPORT (UBR)

0004342
AJ

DOCUMENT # B97000000038
 1. Entity Name
INTERDEVCO/RBG XLVIII L.P.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 OCT 16 PM 11:02

Principal Place of Business Mailing Address
 154 WEST HUBBARD STREET, SUITE 250 154 WEST HUBBARD STREET, SUITE 250
 CHICAGO IL 60610 CHICAGO IL 60610



2. Principal Place of Business 3. Mailing Address
 154 W. HUBBARD SAME
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 600
 City & State City & State
 CHICAGO IL
 Zip Country Zip Country
 60610 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
36-4132382 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
COBER CORPORATE AGENTS, INC.
2601 SOUTH BAYSHORE DRIVE, 19TH FLOOR
MIAMI FL 33133

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.

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

9. Capital Contributions as Shown on record. \$2,600,000.00 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	F97000000303
NAME	RBG XLVIII CORP.
STREET ADDRESS	154 WEST HUBBARD STREET, SUITE 250
CITY-ST-ZIP	CHICAGO IL 60610
DOCUMENT #	L96000001187
NAME	INTERDEVCO-SPRINGS L.C.
STREET ADDRESS	7241 JOG ROAD
CITY-ST-ZIP	LAKE WORTH FL 33467
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	100003429091--5
CITY-ST-ZIP	-10/18/00--01085--020
STREET ADDRESS	***526.25 ***526.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE REQUIRED Date: 10-12-00 Daytime Phone # _____

CR2E003 (5/00)