

# 2002 UNIFORM BUSINESS REPORT (UBR)

0008761 AT

DOCUMENT # B98000000110

1. Entity Name

LOWELL/RBG XLV, L.P.

FILED

02 FEB 19 PM 4:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

80 S.W. 8TH ST., STE. 1870  
MIAMI FL 33130

Mailing Address

80 S.W. 8TH ST., STE. 1870  
MIAMI FL 33130

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-4199356

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DUE BY MAY 1, 2002

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAHN, S L III

80 S.W. 8TH ST., STE. 1870

MIAMI FL 33130

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

\$3,510,100.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P97000066395  
NAME LOWELL AT MONARCH LAKES, INC.  
STREET ADDRESS 80 S.W. 8TH STREET, SUITE 1870  
CITY-ST-ZIP MIAMI FL 33130

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # F97000005195  
NAME RBG XLV, CORP.  
STREET ADDRESS 154 W. HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

S.L. Kohn III

2/13/02

577-8550

Date

Daytime Phone #

CR2E003 (9/01)