

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000002281 (2)**

1. Corporation Name  
**RBG ENCLAVE XXVII CORP.**



Principal Place of Business <b>154 W HUBBARD ST., STE. 250 CHICAGO IL 60610</b>	Mailing Address <b>154 W HUBBARD ST., STE. 250 CHICAGO IL 60610</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**05/09/1995**

2. Principal Place of Business 21 <b>154 W. Hubbard</b> Suite, Apt. #, etc. 22 <b>Ste. 250</b> City & State 23 <b>Chicago, IL</b> Zip 24 <b>60610</b>	2a. Mailing Address 26 <b>154 W. Hubbard</b> Suite, Apt. #, etc. 27 <b>Ste. 250</b> City & State 28 <b>Chicago, IL</b> Zip 29 <b>60610</b>
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4. FEI Number  
**36-4015118**

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PRENTICE HALL LEGAL & FINANCIAL SERVICES  
1201 HAYS ST.  
TALLAHASSEE FL 32301**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>CV</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BLOCK, BRUCE H</b>	1.2 NAME	
STREET ADDRESS	<b>154 WEST HUBBARD, SUITE 250</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHICAGO IL 60610</b>	1.4 CITY-ST-ZIP	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GOLFINE, ROBERT S</b>	2.2 NAME	
STREET ADDRESS	<b>154 WESTHUBBARD SUITE 250</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHICAGO IL</b>	2.4 CITY-ST-ZIP	
TITLE	<b>DS</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROSS, ROBERT S</b>	3.2 NAME	
STREET ADDRESS	<b>154 WEST HUBBARD, SUITE 250</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHICAGO IL 60610</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Robert S Ross**

4-24-98 (21)164-0110

CR2E034 (10/97)