


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90028 012 ***150.00

DOCUMENT # F96000006134						
1. Entity Name RVCF CORP. A						
Principal Place of Business 875 N. MICHIGAN AVE., 41ST FL CHICAGO, IL 60611-901 US			Mailing Address 875 N. MICHIGAN AVE., 41ST FL 26TH FLOOR CHICAGO, IL 60611-901 US			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State		4. FEI Number 36-4135243		
Zip		Country		Applied For Not Applicable		
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE PD	NAME STEPPE, STEPHEN M		<input type="checkbox"/> Delete	TITLE NAME	McClintock, Susan E. – AVP & S 875 N. Michigan Ave, 41 st Flr. Chicago, IL 606111901	
STREET ADDRESS 101 CALIFORNIA ST. 26TH FL	CITY-ST-ZIP SAN FRANCISCO, CA 94111		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS CITY-ST-ZIP	Cappelletti, Joseph S. – VP 875 N. Michigan Ave, 41 st Flr. Chicago, IL 606111901	
TITLE NAME	STREET ADDRESS 875 N. MICHIGAN AVE., 41ST FL		<input checked="" type="checkbox"/> Delete	TITLE NAME	Melkus, Paul A. – VP 875 N. Michigan Ave, 41 st Flr. Chicago, IL 606111910	
STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP CHICAGO, IL 606111901		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS CITY-ST-ZIP	Toney, James E. – VP 875 N. Michigan Ave, 41 st Flr. Chicago, IL 606111901	
TITLE NAME	STREET ADDRESS 875 N. MICHIGAN AVE., 41ST FL		<input type="checkbox"/> Delete	TITLE NAME	Ferkull, Pala M 875 N. Michigan Ave, 41 st Flr. Chicago, IL 606111901	
STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP CHICAGO, IL 606111901		<input checked="" type="checkbox"/> Delete	STREET ADDRESS CITY-ST-ZIP	AS MCCLINTOCK, SUSAN 875 N MICHIGAN AVE, 41ST FL CHICAGO, IL 606111901	
TITLE NAME	STREET ADDRESS 875 N MICHIGAN AVE, 41ST FL		<input type="checkbox"/> Delete	TITLE NAME	AS MCCLINTOCK, SUSAN 875 N MICHIGAN AVE, 41ST FL CHICAGO, IL 606111901	
STREET ADDRESS CITY-ST-ZIP	CITY-ST-ZIP CHICAGO, IL 606111901		<input type="checkbox"/> Delete	STREET ADDRESS CITY-ST-ZIP	AS MCCLINTOCK, SUSAN 875 N MICHIGAN AVE, 41ST FL CHICAGO, IL 606111901	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: <i>Susan E. McClintock</i>						
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR						
Date Daytime Phone #						