


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90067 028 ***150.00

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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

40024347



01242007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
 36-4135243

Applied For
 Not Applicable

5. Certificate of Status Desired \$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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEPPE, STEPHEN M 101 CALIFORNIA ST. 26TH FL SAN FRANCISCO, CA 94111 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVPS MCCLINTOCK, SUSAN E 875 N. MICHIGAN AVE. 41ST FLR CHICAGO, IL 606111901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COOK, ROBERT J 875 N. MICHIGAN AVE., 41ST FL CHICAGO, IL 606111901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAPPELLETTI, JOSEPH S 875 N. MICHIGAN AVE 41ST FLR. CHICAGO, IL 606111901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TONEY, JAMES E 875 N. MICHIGAN AVE., 41ST FL CHICAGO, IL 606111901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCCLINTOCK, SUSAN <input checked="" type="checkbox"/> Delete 875 N MICHIGAN AVE, 41ST FL CHICAGO, IL 606111901

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP & Secretary McClintock, Susan E. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 875 N. Michigan Ave., 41st Flr. Chicago, IL 60611-1901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Toney, James E. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 875 N. Michigan Ave., 41st Flr. Chicago, IL 60611-1901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director McGavic, Derrick E. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 875 N. Michigan Ave, 41st Flr. Chicago, IL 60611-1901

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, changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Susan E. McClintock Susan E. McClintock, VP & Sec. 1/24/2007 312-266-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #