2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000014194

1. Entity Name

ALLIANT TAX CREDIT FUND XXVII, LLC



Principal Place of Business __ Ma

340 ROYAL POINCIANA WAY, STE. 305 PALM BEACH, FL 33480

the obligations of registered agent.

Mailing Address

340 ROYAL POINCIANA WAY, STE. 305 PALM BEACH, FL 33480

FILED Mar 28, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

5. Certificate of Status Desired

54-2107221

\$5.00 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

HAMLIN, CURTIS D ESQ PORGES, HAMLIN, KNOWLES & PROUTY, P.A. 1205 MANATE AVE. W. BRADENTON, FL 34205 DO NOT WRITE IN THIS SPACE

SIGNATURE			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			U00000279413 03/28/05-80065-005 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HORWITZ, SHAWN 21550 OXNARD STREET, SUITE 1020 WOODLAND HILLS, CA 91367		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·
NAME STREET ADDRESS CITY-ST-ZIP			AND -
11. 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 turther 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 managing member or manager of the limited liability company or the receiver of the exemption of the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of the same legal effect as if made under oath; that I am a managing member or manager of the			

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