

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90025 031 \*\*\*\*50.00

**DOCUMENT # M05000006128**

1. Entity Name  
RIVERVIEW FORT MYERS INVESTORS LLC



Principal Place of Business  
212 WEST VAN BUREN STREET, 9TH FLOOR  
CHICAGO, IL 60607

Mailing Address  
212 WEST VAN BUREN STREET, 9TH FLOOR  
CHICAGO, IL 60607

**DO NOT WRITE IN THIS SPACE**



02202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
~~203705799~~ 20-3705627

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
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, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME POLLACK, ALAN  
STREET ADDRESS 212 WEST VAN BUREN STREET, 9TH FLOOR  
CITY-ST-ZIP CHICAGO, IL 60607

TITLE MGR  
NAME LAMOTTE, BRUCE  
STREET ADDRESS 212 WEST VAN BUREN STREET, 9TH FLOOR  
CITY-ST-ZIP CHICAGO, IL 60607

TITLE  
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CITY-ST-ZIP

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11. 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 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Alan Pollack*

Alan Pollack

3/16/06

312

277-7100

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

Date

Daytime Phone #

7103