

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

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



01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

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, 2007**

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	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/31/07-80025-012 50.00

**DO NOT WRITE
IN THIS SPACE**

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

1/23/07

312-377-7100

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

Date

Daytime Phone #