2001 UNIFORM BUSINESS REPORT (UBR

	MENT # P00000 9	90109								
1. Entity Name VESTCOR PARTNERS XXVII, INC.						FILED				
						JAN 22 PM 8:51				
Principal Place of Business		Mailing Address			0	OI JAN 22				
3020 Hartley RD., #300 Jacksonville FL 32257		3020 HARTLEY RD #300 JACKSONVILLE FL 32257			S	SECRETARYIOF STATE TABLAHASSEE FEORIDA				
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State			4.	4. FEI Number Applied For				
Zip Country		Zip Coun		try			\$8.75 Add			
	6. Name and Address of Current Re	aistered Agent				Name and Address of New Register	Fee Require	d 		
		3		Name					1	
3020	H, BERNARD E HARTLEY RD., #300 (SONVILLE FL 32257	Street Address		ss (P.O. E	Box Number is Not Acceptable)	-		<u> </u>		
				City			Zip Code		1	
	named entity submits this statement for the			,			<u> </u>		1	
SIGNATURE .	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible	FILE NOW!	!! FEE			einstating) DA' 10. Election Campaign Financing		0 May Be		
_	requirement and elects to do so.	After MAY 1, 20 Make Check Payat				Trust Fund Contribution.		to Fees		
11.	OFFICERS AND DI		12.		ΑĽ	DDITIONS/CHANGES TO OFFICERS A		*	6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROOD, JOHN D 3020 HARTLEY RD., #300 JACKSONVILLE FL 32257	HARTLEY RD., #300		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	2E034 (10/00)	
TITLE	Delete		-	TITLE			☐ Change	Addition		
NAME STREET ADDRESS CITY-ST-ZIP	Delete			E ET ADDRESS -ST-ZIP	3020	RNARD E. SMITH 0 HARTLEY ROAD, SUITE 300 CKSONVILLE, FLORIDA 32257				
TITLE NAME STREET ADDRESS			NAM	TITLE NAME STREET ADDRESS		STEN K. PACKARD HARTLEY ROAD, SUITE 300	☐ Change	Addition		
CITY-ST-ZIP		Delete	CITY	-ST-ZIP	JACI	KSONVILLE, FLORIDA 32257	Change	☐ Addition	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAM STRE				Onango			
TITLE NAME STREET ADORESS	☐ Delete			E Et address		700035626型神紀 - 神ltion -01/22/0101091014 ***2540.00 ****158.75				
CITY-ST-ZIP	Delete			CITY-ST-ZIP TITLE			☐ Change	Addition	1	
NAME STREET ADDRESS				ET ADDRESS			9	SP		
CITY-ST-ZIP	pertify that the information supplied with the	is filing does not qualify for	the exe	-ST-ZIP mption stated ir	Section	119.07(3)(i), Florida Statutes. I further	certify that the in	nformation	-	
indicated of the cor	on this report or supplemental report is tr poration or the receiver or trustee empow, or on an attachment with an address, wit	ue and accurate and that r ered to execute this report	ny signa as requi	turo chall bayo 1	no como	Joog offoot as it made under eath: the	at I am an officer	or director		