


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007**

FILED
Sep 11, 2007 08:00 AM
Secretary of State

DOCUMENT # A23413
1. Entity Name
BOCA RATON ASSOCIATES IV, LIMITED PARTNERSHIP



Principal Place of Business: 600 CASS AVENUE, WOONSOCKET, RI 02895-4727
Mailing Address: 600 CASS AVENUE, WOONSOCKET, RI 02895-4727

DO NOT WRITE IN THIS SPACE



08292007 No Chg-LP CR2E003 (12/06)

4. FEI Number: 05-0423305 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WHEELER, JAMES J.
7777 W. GLADES RD.
SUITE 300
BOCA RATON, FL, FL 33434

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$500.00 Due by September 14, 2007

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	BOUCHER, JOHN J.	600 CASS AVENUE	WOONSOCKET, RI 028954727
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
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100000773810
09/11/07-80007-021 508.75

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  9/7/07 401-769-1670
Signature and typed or printed name of signing general partner Date Daytime Phone #