


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # A95000001335

1. Entity Name
SIERRA GRILLE PARTNERS I, LIMITED PARTNERSHIP



Principal Place of Business 4400 MARSH LANDING BLVD. SUITE 2 PONTE VEDRA BEACH, FL 32082	Mailing Address 4400 MARSH LANDING BLVD. SUITE 2 PONTE VEDRA BEACH, FL 32082
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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03112005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3330610	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BRUCE, ROBERT G
RB FINANCIAL GROUP, INC.
4400 MARSH LANDING BLVD., STE. 2
PONTE VEDRA BEACH, FL 32082

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

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

9. Capital Contributions as Shown on record. \$396,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P95000043678	STREET ADDRESS	
NAME	SIERRA GRILLE, INC.	CITY-ST-ZIP	
STREET ADDRESS	4400 MARSH LANDING BLVD., STE. 2		
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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CITY-ST-ZIP			

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STAPLE CHECK HERE

14. 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 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: *X Robert G Bruce* **4/5/05** **(904) 285-0400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #