


**2006 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2006\***

**FILED**  
**Apr 11, 2006 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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**DO NOT WRITE IN THIS SPACE**



02152006 No Chg-LP CR2E003 (11/05)

4. FEI Number <b>59-3330610</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

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**

**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 **04/26/06**

Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2006, Fee will be \$900.00**

**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	P95000043678 SIERRA GRILLE, INC. 4400 MARSH LANDING BLVD., STE. 2 PONTE VEDRA BEACH, FL 32082
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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: *[Signature]* **4/10/06 (904) 285-0400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #