#### 2008 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2008**

#### DOCUMENT # B96000000155

TRIAD RIVIERA LIMITED PARTNERSHIP

Principal Place of Business \*\*\*\* Mailing Address

2801 ALASKAN WAY, #107 SEATTLE, WA 98121

2801 ALASKAN WAY, #107 SEATTLE, WA 98121

**FILED** Apr 03, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

01032008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 91-1721971

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

### DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registere	d office or registered agent, or both, in the	State of Florida.	I am familiar with, and accept
the obligations of registered agent			
	•		

# FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.

	ı	NOTE: General Partners MAY NOT be changed on the
ı	12.	GENERAL PARTNER INFORMATION
STAPLE CHECK HERE	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F96000002352 TRIAD DEVELOPMENT, INC. 2801 ALASKAN WAY, #107 SEATTLE, WA 98121
	DOCUMENT #  NAME  STREET ADDRESS  CITY-ST-ZIP	
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	-
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	·
	DOCUMENT A NAME STREET ADDRESS	-

U00000879905 04/15/08-80040-002 508.75

## DO NOT WRITE IN THIS SPACE

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 eath; 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: