

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07504

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** VILLA RAVINE ASSOCIATES, LTD.

**Current Principal Place of Business:**

1500 N.W. 16TH AVENUE  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

1500 N.W. 16TH AVENUE  
GAINESVILLE, FL 32605

**New Mailing Address:**

**FEI Number:** 59-1838157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEIDORF, MURRAY H  
1500 N.W. 16TH AVE.  
GAINESVILLE, FL 32605 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: NEIDORF, MURRAY H  
Address: 11400 WEST OLYMPIC BLVD  
City-St-Zip: LOS ANGELES, CA 90064

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: MURRAY H. NEIDORF

\_\_\_\_\_  
Electronic Signature of Signing General Partner

02/17/2011

\_\_\_\_\_  
Date