2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED May 01, 2008 08:00 AN Secretary of State

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1. Entity Name THE RIVERS APARTMENTS, LTD.



Principal Place of Business 1002 W. 23RD ST., SUITE 400 PANAMA CITY, FL 32405

Mailing Address

1002 W. 23RD ST., SUITE 400 PANAMA CITY, FL 32405



DO NOT WRITE IN THIS SPACE

01162008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2066111

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

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

PIPPIN, LAURETTA J 1002 W. 23RD ST. SUITE 400 PANAMA CITY, FL 32405

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

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. 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	598978			
NAME:	ROYAL AMERICAN DEVELOP.			
STREET ADORESS	1002 W. 23RD ST. #400			
CHY+S1-ZIP	PANAMA CITY, FL			
D9CUM(N) ≠	•			
MAME	CHAPMAN, JOSEPH F., III			
STREET ADDRESS	1002 W. 23RD ST. #400			
CITY+S1-ZIP	PANAMA CITY, FL			
DOCUMENT ≢				
NAME				
STREET ADDRESS				
CITY-SI-ZIP				
DOCUMENT #				
NAML				
STHEET ADDRESS				
CITY-ST-ZIP				
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STREET ADDRESS				
	POCUMENT / NAME STREET ADDRESS CUTY-ST-ZIP DOCUMENT / NAME			

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14. I hereby certify that the information supplied with this filling 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 proposered execute this report as required by Chapter 620, Florida Statutes

SIGNATURE

OH+-S1-ZIP DOCUMENT # MAME STREET ADDRESS CHY-ST-ZIP

Lauretta J. Pippin, Secretary

4/10/08

(850) 769-8981

Daytime Phone #