

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**DOCUMENT # A11964**

1. Entity Name  
RIVER JUNCTION APARTMENTS, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN -8 AM 8:07

Principal Place of Business  
225 RIVER ROAD EAST  
CHATTAHOOCHEE, FL 32324

Mailing Address  
POST OFFICE BOX 66  
CHATTAHOOCHEE, FL 32324

**DO NOT WRITE IN THIS SPACE**



01042007 No Chg-LP CR2E003 (12/06)

4. FEI Number  
59-2236253

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

D'ALEMBERTE, RICHARD W.  
225 RIVER ROAD  
CHATTAHOOCHEE, FL 32324

**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

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

DATE

**FILE NOW!! FEE IS \$500.00**  
**After May 1, 2007, 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  
D'ALEMBERTE, RICHARD W  
275 NORTH BOLIVAR ST  
CHATTAHOOCHEE, FL

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 #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

300084146713  
01/12/07--01011--010 \*\*158.75

**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 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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

January 4, 2007 850-663-8484

STAPLE CHECK HERE