

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

**FILED**  
**Apr 18, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A14015**

1. Entity Name  
**ST. LUCIE RIVER COMPANY (LTD.)**



Principal Place of Business  
**ONE NORTH CLEMATIS STREET, SUITE 200  
WEST PALM BEACH, FL 33401**

Mailing Address  
**ONE NORTH CLEMATIS STREET, SUITE 200  
WEST PALM BEACH, FL 33401**



02272007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2269287**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

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

**TABERNILLA, ARMANDO A  
ONE NORTH CLEMATIS STREET, SUITE 200  
WEST PALM BEACH, FL 33401**

**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 # **250876**  
NAME **CLOSTER FARMS, INC.**  
STREET ADDRESS **ONE NORTH CLEMATIS STREET, SUITE 200**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

DOCUMENT # **G24306**  
NAME **ST. LUCIE RIVER MANAGEMENT, INC.**  
STREET ADDRESS **ONE NORTH CLEMATIS STREET, SUITE 200**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

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U000000715409  
04/27/07-80062-023 500.00

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:**

**Armando A. Tabernilla, Asst. Secretary of St. Lucie River Mgmt. Inc. G.P.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date **4/17/07**

Daytime Phone # **561-655-6303**

STAPLE CHECK HERE