


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 6, 2006**

<b>DOCUMENT #A14887</b> 1. Entity Name RIVER WALK MOBILE HOME PARK, LTD.	
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Principal Place of Business 8518 GIBSONTON DRIVE GIBSONTON, FL 33534	Mailing Address 401 SOUTH ALBANY AVENUE TAMPA, FL 33606
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**DO NOT WRITE IN THIS SPACE**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP -6 AM 10:45



08172006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-2334927	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
STEINER, NELSON C.  
401 SOUTH ALBANY AVENUE  
TAMPA, FL 33606

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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	STEINER, NELSON C.
STREET ADDRESS	401 SOUTH ALBANY AVENUE
CITY-ST-ZIP	TAMPA, FL 33606
DOCUMENT #	
NAME	
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000079825070  
09/14/06--01041--001 \*\*500.00

**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: X**  **Nelson C. Steiner** **8/22/06** **813-350-9399**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE