

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A17196

**FILED**  
**Apr 21, 2009**  
**Secretary of State**

**Entity Name:** RIVER OAKS ASSOCIATES LIMITED PARTNERSHIP

**Current Principal Place of Business:**

247 N WESTMONTE DR  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

247 N WESTMONTE DR  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 05-0413325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FILDES, RICHARD J  
% LOWNDES, DROWNICK, DOSTER ET AL  
215 N. EOLA AVE.  
ORLANDO, FL 32802 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 #: G46246  
Name: PICERNE DEVELOPMENT CORPORATION OF FLORIDA  
Address: 247 NORTH WESTMONTE DR.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714  
Document #:  
Name: PICERNE, ROBERT M  
Address: 247 NORTH WESTMONTE DR.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT M PICERNE

MGR

04/21/2009

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

\_\_\_\_\_  
Date