

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 19, 2007 08:00 A
Secretary of State

DOCUMENT # A17229

1. Entity Name
RIVER ASSOCIATES, LTD.



Principal Place of Business
% CONTINENTAL PROPERTY SERVICES, INC.
444 SEABREEZE BLVD., SUITE 600
DAYTONA BEACH, FL 32118

Mailing Address
% CONTINENTAL PROPERTY SERVICES, INC.
444 SEABREEZE BLVD., SUITE 600
DAYTONA BEACH, FL 32118



01252007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2483149

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JENKINS, PATRICIA S
444 SEABREEZE BLVD., SUITE 600
DAYTONA BEACH, FL 32118

**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 # **L01000014524**
NAME **ROLF H. GARDEY, L.L.C.**
STREET ADDRESS **444 SEABREEZE BLVD., SUITE 600**
CITY-ST-ZIP **DAYTONA BEACH, FL 32118**

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05/01/07-80023-023 500.00

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: *Patricia S. Jenkins*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/03/07

Date

Daytime Phone #

STAPLE CHECK HERE