


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A19011	
1. Entity Name RIVERBEND APARTMENTS, LTD.	

Principal Place of Business C/O DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD SUITE 508 PALM BEACH GARDENS, FL 33410-2758	Mailing Address C/O DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD SUITE 508 PALM BEACH GARDENS, FL 33410-2758
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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03032004 Chg-LP CR2E003 (10/03)

City & State	City & State	4. FEI Number 59-3278834	Applied For Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD STE. 508 PALM BEACH GARDENS, FL 33410	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

9. Capital Contributions as Shown on record. \$271,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$271,000.00
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT # P01000057655	NAME RIVERBEND GENERAL PARTNER, INC.	STREET ADDRESS	
STREET ADDRESS 3801 PGA BOULEVARD STE. 508	CITY-ST-ZIP PALM BEACH GARDENS, FL 334102758	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
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STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	

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05/10/04 80042-802 535.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Riverbend General Partner, Inc.
By: *[Signature]* MARCH 3/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE