## 2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) **DUE BY MAY 1, 2004**

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## **FILED** Apr 09, 2004 08:00 AM Secretary of State DOCUMENT # A29018 1. Entity Name RIDGECREST VILLAGE, LTD. Principal Place of Business Mailing Address 6108 - 26TH STREET W. SUITE 2 6108 - 26TH STREET W. SUITE 2 **BRADENTON FL 34207 BRADENTON FL 34207** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (11/03) Applied For City & State City & State 4. FEI Number 65-0209829 Not Applicable Zip Country Zφ Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RIDGECREST DEVELOPMENT & MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 6108 - 26TH STREET WEST SUITE 2 **BRADENTON FL 34207** Zip Code FL 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, typed or printed name of registered agent and title if applicable, DATE 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT, OF STATE \$525,000.00 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. 12. DOCUMENT # L16929 STREET ADDRESS RIDGECREST DEVELOPMENT & MANAGEMENT, INC. NAME 6108 - 26TH ST.W., S-2 STREET ADDRESS CITY - ST- ZIP U00000114862 CITY-ST-ZIP **BRADENTON FL** 04716704-80001-006 526.25 DOCEMENT # STREET ADDRESS NAME STREET ADDRESS CITY - ST - 73P CITY -ST -ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS GITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME SZRECT ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCUMENT** # STREET ADDRESS MANAF SHECK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-70P CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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