## 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A29029

FILED Jul 08, 2005 Secretary of State

Entity Name: NORTH RIVER LIMITED PARTNERSHIP, I, A FLORIDA LIMITED PARTNERSHIP

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1454 551 17TH STREET WEST BRADENTON, FL 34206 PALMETTO, FL 34221

Current Mailing Address: New Mailing Address:

P.O. BOX 1454 551 17TH STREET WEST BRADENTON, FL 34206 PALMETTO, FL 34221

FEI Number: 65-0154981 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

GRAVELY, JEFF

4505 DOLPHIN LN.

P.O. BOX 1454

BRADENTON, FL 34205 US

AMERSON, JAMES G

551 17TH STREET WEST

PALMETTO, FL 34221 US

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: JAMES AMERSON 07/08/2005

Electronic Signature of Registered Agent Date

Capital Contributions as Shown on record: 10,000.00

**Amount of Capital Contributions in Florida to date: 10,000.00** 

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

Name: GRAVELY, JEFF

 Address:
 4505 DOLPHIN LN.
 Address:

 City-St-Zip:
 PALMETTO, FL
 City-St-Zip:

Document #:

Name: AMERSON, JIM

 Address:
 804 26TH AVE. W.
 Address:

 City-St-Zip:
 PALMETTO, FL
 City-St-Zip:

Document #:

Name: AMERSON, GLENNA MARIE

 Address:
 804 26TH AVE. W.
 Address:

 City-St-Zip:
 PALMETTO, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES AMERSON G 07/08/2005