

# 2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A29029

FILED  
Jan 10, 2006  
Secretary of State

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

**Current Principal Place of Business:**

551 17TH STREET WEST  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

551 17TH STREET WEST  
PALMETTO, FL 34221

**New Mailing Address:**

FEI Number: 65-0154981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AMERSON, JAMES G  
551 17TH STREET WEST  
PALMETTO, FL 34221 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 #:

Name: GRAVELY, JEFF  
Address: 4505 DOLPHIN LN.  
City-St-Zip: PALMETTO, FL

Document #:

Name: AMERSON, JIM  
Address: 804 26TH AVE. W.  
City-St-Zip: PALMETTO, FL

Document #:

Name: AMERSON, GLENNA MARIE  
Address: 804 26TH AVE. W.  
City-St-Zip: PALMETTO, FL

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GLENNA AMERSON

GP

01/10/2006

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

\_\_\_\_\_  
Date