

# 2001 UNIFORM BUSINESS REPORT (UBR)

0014943 AF

**DOCUMENT # A30664**

1. Entity Name

**RIVER OAKS PARTNERS LIMITED**

FILED

01 JAN 22 PM 12:15

Principal Place of Business

Mailing Address

**RIVER OAKS R V RESORT  
RUSKIN FL 33570**

**2231 WHITFIELD PARK AVE.  
SARASOTA FL 34243  
US**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0219851**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRAVELY, JEFFREY D.  
3651 CORTEZ ROAD WEST  
SUITE 300  
BRADENTON FL 34210**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

**\$175,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**GRAVELY, JEFFREY D.  
3651 CORTEZ ROAD, WEST  
BRADENTON FL**

STREET ADDRESS

**500003576415--3**

**-01/26/01--01048--010**

CITY-ST-ZIP

**\*\*\*526.25 \*\*\*526.25**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**RITZENTHALER, LARRY J.  
2231 WHITFIELD PARK AVE.  
SARASOTA FL**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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CITY-ST-ZIP

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CITY-ST-ZIP

14. I hereby 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

SIGNATURE:

*Larry J. Ritzenthaler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**LARRY J. RITZENTHALER** 941-758-0181

Date

Daytime Phone #

1-09-01

CR2E003 (11/00)