


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
Feb 08, 2005 08:00 AM
Secretary of State

DOCUMENT # A30745			
1. Entity Name R.I.A. PENSACOLA LIMITED PARTNERSHIP			
Principal Place of Business 3355 RICHMOND ROAD, SUITE 231A BEACHWOOD, OH 44122		Mailing Address 23200 CHAGRIN BLVD., BLDG. 1, SUITE 102 BEACHWOOD, OH 44122	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01262005 Chg-LP CR2E003 (10/03)

4. FEI Number
31-1310040

Applied For
Not Applicable

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	
C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		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. 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. \$338,500.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	WEINGART, NED S.	STREET ADDRESS	
NAME	3355 RICHMOND ROAD, SUITE 231A	CITY-ST-ZIP	
STREET ADDRESS	BEACHWOOD, OH 44122		
CITY-ST-ZIP			
DOCUMENT #	P31522	STREET ADDRESS	
NAME	EQUITY PLANNING HLDG, CO	CITY-ST-ZIP	
STREET ADDRESS	3355 RICHMOND ROAD, SUITE 231A		
CITY-ST-ZIP	BEACHWOOD, OH 44122		
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CITY-ST-ZIP			

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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: Ned S. Weingart NED S. WEINGART Jan. 31, 2005 (216) 595-0780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #