



2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 24 AM 10:52

DOCUMENT # A31618 1. Entity Name RIO VISTA PARTNERS, LTD.					
Principal Place of Business ATTN: DONALD A. HAAS 1617 RIDGEWOOD AVENUE, SUITE F HOLLY HILL, FL 32117				Mailing Address ATTN: DONALD A. HAAS 1617 RIDGEWOOD AVENUE, SUITE F HOLLY HILL, FL 32117	
2. Principal Place of Business ATTN: JOSEPH A. ROTH Suite, Apt. #, etc. 1617 RIDGEWOOD AVE, STE G City & State HOLLY HILL, FL Zip 32117 Country VOLUSIA		3. Mailing Address ATTN: JOSEPH A. ROTH Suite, Apt. #, etc. 1617 RIDGEWOOD AVE, STE G City & State HOLLY HILL, FL Zip 32117 Country VOLUSIA		 01072005 Chg-LP CR2E003 (10/03)	
4. FEI Number 59-3075115				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROTH, JOSEPH A 1617 RIDGEWOOD AVENUE HOLLY HILL, FL 32117			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$8,500.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	S10082		STREET ADDRESS	1617 RIDGEWOOD AVE, STE G	
NAME	RIO VISTA OFFCE CNTR, INC		CITY-ST-ZIP	HOLLY HILL, FL 32117	
STREET ADDRESS	1617 RIDGEWOOD AVE., #F		STREET ADDRESS		
CITY-ST-ZIP	HOLLY HILL, FL		CITY-ST-ZIP		
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CITY-ST-ZIP			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: *Joseph A. Roth* JOSEPH A. ROTH 1-7-05 386-677-3104

STAPLE CHECK HERE