535 AL

DOCUMENT # A9400000352 RIVER REACH OF ORANGE COUNTY, LTD.						FILED	
HATTI HEADY OF STURIOL SOSIVIT, CID.						,	
Principal Place of Business Mailing Address						01 MAY -1 PM 6: 32	
1002 WEST 23RD STREET. SUITE 400 PANAMA CITY FL 32405			1002 WEST 23RD STREET. SUITE 400 PANAMA CITY FL 32405		400	SECRETARY OF STATE TACLAHASSEE, FLORIDA	
2. Principal Place of Business			3. Mailing Address	3. Mailing Address			
Suite, Apt. #, etc.			Suite, Apt. #, etc.		···	DO NOT WRITE IN THIS SPACE	
City & State			City & State			4. FEI Number Applied For Not Applicable	
Zip	Country Zip			Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name	and Address of Curre	nt Hegistered Agent	-	7. Name and Address of New Registered Agent Name		
HENRY, ROBERT F III					Street Address (P.O. Box Number is Not Acceptable)		
1002 WEST 23RD STREET, SUITE 400							
PANAMA CITY FL 32405					City FL Zip Code		
8. The above						registered agent, or both, in the State of Florida.	
	· · · · · · · · · · · · · · · · · · ·	or printed name of registered age				e required when reinstating) DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE	
9. Capital Contributions as Shown on record. \$8,336,348.00 In FLORIDA to cate.						SEE REVERSE SIDE FOR FEE INFORMATION EGISTERED AND ACTIVE WITH THIS OFFICE.	
	NOTE	: General Partners I	MAY NOT be changed on t	lie form	i; an amen	dment must be filed to change a general partner.	
12. GENERAL PARTNER INFORMATION DOCUMENT # 508078				13.		ADDRESS CHANGES ONLY	
NAME STREET ADDRESS CITY-ST-ZIP	598978 ROYAL AMERICAN DEVELOPMENT, INC. 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405				EET ADDRESS (-ST-ZIP	3000042434032 -05/18/01 -01005001	
DOCUMENT #	PANAMA CITT FL 32403		STR	**45187.28 ****535.00			
STREET ADDRESS City-St-Zip			CITY	r-ST-ZIP			
DOCUMENT #				STR	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		<u></u>		CITY	r-ST-ZIP	BK	
DOCUMENT #				STR	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				CITY	'-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS					EET ADDRESS		
CITY-ST-ZIP		, ···	dis della terre tre service s	-	'-ST-ZIP		
NAME STREET ADDRESS					EET ADDRESS		
CITY-ST-ZIP			-	CITY	'-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify fo 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 he 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 Chap er 620, Florida Statutes

SIGNATURE:

WHAT AND OF PENTER NAME OF SIGNING GENERAL PARTIES

2001 UNIFORM BUSINESS REPORT (UBR)

. aut su

4080

850 24 898

Daytime Phone