#### 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

#### FILED Feb 25, 2008 08:00 Al Secretary of State

Due b	y May 1, 2000	
DOCUMENT # A99000 1. Entity Name IMPERIAL RIVER, LIMITED	0000323	
Principal Place of Business	Mailing Address	
26811 SOUTH BAY DR., STE 350 BONITA SPRINGS. FL 34134	26811 SOUTH BAY DR., STE 350 BONITA SPRINGS, FL 34134	)



### DO NOT WRITE IN THIS SPACE

02062008 No Chg-LP CR

CR2E003 (12/06)

4. FEI Number 65-0898684 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CECIL, W. JEFFREY ESQ 5801 PELICAN BAY BOULEVARD, SUITE 300 NAPLES, FL 34108

## DO NOT WRITE IN THIS SPACE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	U00000840647 03/06/08-80056-007 500.00
SIGNATURE Signature, typed or printed name of registered agent and side it applicable.	DATE
the obligations of registered agent.	agent, or cont, in the orang of Frence. I am familier with, and accept

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
DOCUMENT # NAME STRELT ADDRESS CITY-ST-ZIP	ROSINUS, FRANZ J 26811 SOUTH BAY DR., STE 350 BONITA SPRINGS, FL 34134
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # -NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

# DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

12-20-08

Daylime Phone #