


**2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004**

**FILED
Apr 20, 2004 08:00 AM
Secretary of State**

DOCUMENT # B92000000079
1. Entity Name
ROOT RIVERFRONT PARTNERS, L.P., LTD.



Principal Place of Business
275 CLYDE MORRIS BLVD.
ORMOND BEACH, FL 32174

Mailing Address
275 CLYDE MORRIS BLVD.
ORMOND BEACH, FL 32174

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country



01122004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3152591

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOGES, WILLIAM J
275 CLYDE MORRIS BLVD.
ORMOND BEACH, FL 32174

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

9. Capital Contributions as Shown on record. **\$3,890,097.00**

10. Amount of Capital Contributions in FLORIDA to date **\$3,890,099.00**

**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 #	P00000093902
NAME	ROOT REAL ESTATE CORP.
STREET ADDRESS	275 CLYDE MORRIS BLVD.
CITY - ST - ZIP	ORMOND BEACH, FL 32174
DOCUMENT #	M94000000022
NAME	RDT, L.L.C., L.C.
STREET ADDRESS	275 CLYDE MORRIS BLVD.
CITY - ST - ZIP	ORMOND BEACH, FL 32174
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STAPLE CHECK HERE

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:  Philip Maroney, Vice Pres 4/7/04 386.671.4908

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