


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000004834
 1. Entity Name
 RIVER PLACE ASSOCIATES, L.L.C.



Principal Place of Business 4400 MARSH LANDING BLVD. SUITE 2 PONTE VEDRA BEACH, FL 32082	Mailing Address 4400 MARSH LANDING BLVD. SUITE 2 PONTE VEDRA BEACH, FL 32082
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03112005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0616319	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 FAIRBANKS, RANDAL C
 217 PONTE VEDRA PARK DRIVE
 SUITE 200
 PONTE VEDRA BEACH, FL 32082

DO NOT WRITE IN THIS SPACE

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. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BRUCE, ROBERT G 4400 MARSH LANDING BLVD., SUITE 2 PONTE VEDRA BEACH, FL 32082
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 04/06/05-R0004-017 \$0.00

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11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X Robert G Bruce Date: 4/4/05 Daytime Phone #: (904) 285-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE