

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017688

**FILED**  
**Apr 15, 2008**  
**Secretary of State**

**Entity Name:** RIVERFRONT PARTNERS, LLC

**Current Principal Place of Business:**

1501 SOUTH FLORIDA AVE  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2825  
LAKELAND, FL 338062835

**New Mailing Address:**

PO BOX 2835  
LAKELAND, FL 338062835

**FEI Number:** 61-1429724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FOWLER WHITE BOGGS BANKER P.A.  
C/O HUNTER J. BROWNIEE  
501 E. KENNEDY BLVD. SUITE 1700  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HEIGHTS OF TAMPA, LL, C  
Address: 6508 EAST FOWLER AVENUE  
City-St-Zip: TAMPA, FL 336172406

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HEIGHTS OF TAMPA, LL, C  
Address: 1501 SOUTH FLORIDA AVENUE  
City-St-Zip: LAKELAND, FL 33803 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT W. SCHARAR

MGR

04/15/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date