

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000040853

Entity Name: BF RIVERSIDE GP, LLC

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3390 MARY STREET  
SUITE 200  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3390 MARY STREET  
SUITE 200  
COCONUT GROVE, FL 33133

**New Mailing Address:**

FEI Number: 26-2609079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

STOTZER, THEODORE R  
321 EAST HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 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  
Name: BONEFISH PARTNERS, LLC  
Address: 3390 MARY STREET, SUITE 200  
City-St-Zip: COCONUT GROVE, FL 33133

I hereby 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: BONEFISH PARTNERS, LLC

MGRM

04/11/2011

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