2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000003242

1. Entity Name

RIVERVIEW CENTER ASSOCIATES, L.L.C.



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205

1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205

FILED Feb 02, 2004 08:00 AM Secretary of State



01152004 No Chg-LLC

CR2E083 (10/03)

FEI Number
 65-0932950

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEITRICH, DAVID K 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205

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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

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

(NOTE. Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2004

<u> </u>	
9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM DEITRICH, DAVID K 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ST. PAUL, ALEXANDRA 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRATHER, ALAN 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PETRUFF, PATRICIA 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM DYE, STEPHEN R 1111 THIRD AVENUE WEST, SUITE 300 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000030616 02/04/04-80115-021 50.00

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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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMORY OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #