

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000003452

1. Entity Name
RIVERGATE APARTMENTS, L.L.C.



Principal Place of Business
105 TALLAPOOSA STREET
SUITE 300
MONTGOMERY, AL 36104

Mailing Address
105 TALLAPOOSA STREET
SUITE 300
MONTGOMERY, AL 36104

FILED
Aug 27, 2008 08:00 AM
Secretary of State



07092008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1501698

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000958534
08/27/08-80006-019 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SUMMIT AMERICA PROPERTIES, INC.
STREET ADDRESS	105 TALLAPOOSA STREET, SUITE 300
CITY-ST-ZIP	MONTGOMERY, AL 36104

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Scott Crossfield CFO

8-22-08

334-954-4458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #