## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Feb 26, 2007 08:00 A Secretary of State

DOCUMENT # A03  1. Entity Name INGLIS RRH, LTD.				
Principal Place of Business 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756		:	Mailing Address 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756	**************************************

DO NOT WRITE IN THIS SPACE



01192007 No Chg-LP

CR2E003 (12/06)

4. FEI Number			Applied For
20-0254777		[	Not Applicable
5. Certificate of Status Desired	×		5 Additional

FLYNN, THOMAS F 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756 DO NOT WRITE IN THIS SPACE

ine obligal	ions or registered agent.			
SIGNATURE	Signature, typed or printed name of registered agent and title 4 applicable.		DATE	
	FILE NOW!!! FEE IS \$500.00 . After May 1, 2007, Fee will be \$9			
	A GENERAL PARTNER THAT IS A BUSINESS I NOTE: General Partners MAY NOT be changed or			r.
12.	GENERAL PARTNER INFORMATION			
DOCUMENT #	L03000032118			
NAME	IVA, LLC			
STHEIFT ADDRESS	516 LAKEVIEW ROAD, UNIT 8			
CITY STUDIE	CICADIAIATED EL 22750		A STATE OF THE STA	一一一一点,不然 特許區

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

03/07/07-80054-004 508.

DO NOT WRITE IN THIS SPACE

	STHEET ADDRESS CITY -ST-ZIP	516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756
_	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
	DOGUMENT # NAMF STREET ADDRESS CITY-ST-ZIP	
7,17	DOCUMENT # NAME STREET ADDRESS CITY+ST-ZIP	
	DOCUMENT # NAME STREET ADDRESS OITY-ST-7/P	
	DOCUMENT # NAME STREET ADDRESS	

14. I hereby certify that the information supplied with this filling 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

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CITY-ST-ZIP

EVIN TELYNN 2/15/07 727-449-118