## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

FILED Feb 21, 2008 08:00 Al Secretary of State

DOCUMENT # A11888

1. Entity Name ROLLING HILLS, LTD.



Principal Place of Business

516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756

Mailing Address

516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756



01152008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2267137

Applied For Not Applicable

5. Certificate of Status Desired

XX \$8.75 Additional

Fee Required

Name and Address of Current Registered Agent

FLYNN, THOMAS F 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756-3302 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

000000034<u>211</u> 777070000034<u>211</u>

44-008 508.75

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner

	12.	GENERAL PARTNER INFORMATION
	DOCUMENT # NAME STREET ADDRESS CITY -ST-ZIP	P98000081539 ROLLING HILLS ONE OF DUNNELLON, INC. 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 337563302
	Document #  NAME SIREET ADDRESS CITY-ST-7/P	·
	DOCUMENT # NAME STREET ADDRESS CITY -ST-ZIP	
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	·
	DOCUMENT & NAME STREET ADDRESS CITY-ST-7IP	·
	DOCUMENT P NAME STREET ADDRESS	

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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Kevin T Flynn

2/15/08

727-449-1182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTIEFVICE-President of