

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

DOCUMENT #A17661 1. Entity Name R.R.R., LIMITED	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 JUL 13 PM 8:47

Principal Place of Business 4073 SE FAIRWAY DR. EAST STUART, FL 34997	Mailing Address 421 B.B. SAMS DR DATAN ISLAND, SC 29970
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2. Principal Place of Business 5250 Conway Rd. Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Orlando, Florida Zip 32812	Country	City & State Zip	Country
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4. FEI Number 31-1137003	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROBY, RICHARD W. 4073 SE FAIRWAY DRIVE EAST STUART, FL 34997	7. Name and Address of New Registered Agent Name Roby, Richard W. Street Address (P.O. Box Number is Not Acceptable) 1555 NW. St. Lucie W. Blvd. (Suite #201) City Port St. Lucie, FL Zip Code 34986
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$900.00
On or after September 6, 2006, Fee will be \$1000.00

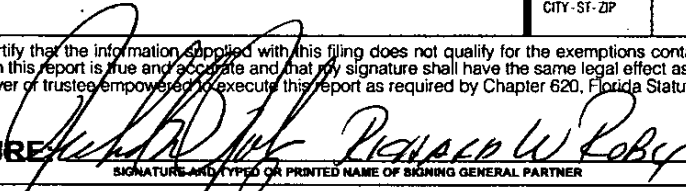
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	ROBY, RICHARD W.	STREET ADDRESS	
NAME	421 BB SAMS DR	CITY-ST-ZIP	
STREET ADDRESS	DATAN ISLAND, SC 29920		
CITY-ST-ZIP			
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 07/19/06--01049--003 **900.00

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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  **RICHARD W. ROBY** **7/10/06** **614 888 3356**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #