2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   **A11888**

1. Entity Name

ROLLING HILLS, LTD.

Principal Place of Business	Mailing Address
516 LAKEVIEW ROAD, UNIT 8 CLEARWATER FL 33756	516 LAKEVIEW ROAD, UNIT 8 CLEARWATER FL 33756

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	**DUE BY MAY 1, 2002**
City & State	City & State	4. FEI Number **59-2267137** Applied For / Not Applicable
Zip Country	Zip Country	5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FLYNN, THOMAS F **516 LAKEVIEW ROAD, UNIT 8** **CLEARWATER FL 33756-3302**	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____

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

9. Capital Contributions as Shown on record.	**$305,000.00**	10. Amount of Capital Contributions in FLORIDA to date.	11. **MAKE CHECK PAYABLE TO DEPT. OF STATE** **SEE REVERSE SIDE FOR FEE INFORMATION**

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 # P98000081539 NAME ROLLING HILLS ONE OF DUNNELLON, INC. STREET ADDRESS 516 LAKEVIEW ROAD, UNIT 8 CITY-ST-ZIP CLEARWATER FL 33756-3302	STREET ADDRESS CITY-ST-ZIP
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STAPLE CHECK HERE

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

As President of Corporate General Partner

SIGNATURE: _Thomas F. Flynn_   Thomas F. Flynn   2/28/02   727-449-1182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER   Date   Daytime Phone #

CR2E003 (9/01)