

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

**DOCUMENT # A02000000544**

1. Entity Name  
**PELICAN COVE RRH, LTD.**



Principal Place of Business  
**4821 NW 13TH AVE**  
**GAINESVILLE, FL 32605**

Mailing Address  
**PO BOX 358626**  
**GAINESVILLE, FL 32635-8626**

2. Principal Place of Business - No P.O. Box #  
**24207 NW 110th Ave**

3. Mailing Address  
**24207 NW 110th Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State **Alachua, FL**

City & State **Alachua, FL**

Zip **32615**

Country

Zip **32615**

Country

02072007 Chg-LP CR2E003 (12/06)

4. FEI Number  
**03-0422463**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
 Fee Required

**6. Name and Address of Current Registered Agent**

**SANCHEZ, J. ROLANDO**  
**4821 NW 13TH AVE**  
**GAINESVILLE, FL 32605**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

**24207 NW 110th Ave**

City **Alachua**

**FL**

Zip Code **32615**

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.

**J. Rolando Sanchez**

**Feb. 7, 2007**

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, 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 # **L02000008554**  
 NAME **SANCHEZ RENTAL HOUSING, LLC**  
 STREET ADDRESS **4821 NW 13TH AVE**  
 CITY-ST-ZIP **GAINESVILLE, FL 32605**

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS **24207 NW 110th Ave**  
 CITY-ST-ZIP **Alachua, FL 32615**

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS  
 CITY-ST-ZIP

**300095230743**  
**03/29/07--01038--001 \*\*508.75**

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STREET ADDRESS  
 CITY-ST-ZIP

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:

**J. Rolando Sanchez**

**J. Rolando Sanchez**

**Feb. 7, 2007**

**386-454-1460**

**FILED**

**2007 MAR 22 AM 11:08**

**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**



STATE OF FLORIDA