2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

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Feb 19, 2008 08:00 AM Secretary of State **DOCUMENT # A02000000544** 1. Entity Name PELICAN COVE RRH, LTD. Principal Place of Business Mailing Address 24207 NW 110TH AVE 24207 NW 110TH AVE ALACHUA, FL 32615 ALACHUA, FL 32615 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02042008 Chg-LP CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 03-0422463 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SANCHEZ, J. ROLANDO Street Address (P.O. Box Number is Not Acceptable) 24207 NW 110TH AVE ALACHUA, FL 32615 City 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. I am familiar with, and accept the obligations of registered agent. :1000000933110 n2/27/08-80087-013 508.75 DATE Signature, typed or printed name of registered agent and title if applicable 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. L02000008554 DOCUMENT # STREET ADDRESS SANCHEZ RENTAL HOUSING, LLC NAME STREET ADDRESS 24207 NW 110TH AVENUE CITY-ST-ZIP CITY-ST-ZIP ALACHUA, FL 32615 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-SY-ZIP 14. I hereby certify that the information supplied with this fliing 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

J. RO CANDO SAUCHEE

FILED

386-454-1460