2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

Due by May 1, 2005						FILED				
DOCUMENT # A0400000049  1. Entity Name WRH THREE RIVERS, LTD.							5 APR 21	PH 2: 13 OF STATE E. FLORIDA		
Principal Plac	e of Business				TALL	-AHASSE	E. FLORIDA	1		
1			VENUE SOUTH, SUITE 904							
Principal Place of Business     3. Mailing Address										
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Suite, Apt. #, etc.		Suite, Apt. #, etc.		03082005	Chg-LP	CR2E003	(10/03)			
City & State		City & State			4. FEI Numb	er		Applied For Not Applicat	ole	
Zip	Country	Zip	Cour	ntry	5. Certificate	of Status Desired		3.75 Additional e Required		
	6. Name and Address of Current	Registered Agent	<u></u>		7. Name and	Address of New R				
 				Name /	7.0V	- 1 1 4			_	
MILLER, J				Character of the conference of	DO Brown	Kutted				
	ND AVENUE SOUTH, SUITE RSBURG, FL 33701	904		100 5e		er is Not Acceptable	south.	Suite 90	,4	
31. FEIL	13B0NG, FE 33701					•			_	
				City St F	Poto CL	nuca	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. I am familiar with, and accept the obligations of registered agent.									pt	
SIGNATURE 1.1.1.23-2505								5		
Signatule, typed or printed name of registered agent and title if applicable.						- · · ·	DATE			
9. Capital Contributions as Shown on record. \$900.00 10. Amount of Capital Contributions in FLORIDA to date.						810	H. 21	<u>ک</u>		
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 PARTNE	R INFORMATION	13.			ADDRESS CHA	ANGES ONLY		_	
DOCUMENT / NAME	WRH PROPERTIES, INC.		STR	EET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY	r-ST-ZIP						
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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										