


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 04, 2006 08:00 AM
Secretary of State

DOCUMENT # A04000001010
 1. Entity Name
RTH PARTNERS, LLLP



Principal Place of Business 2300 GLADES ROAD SUITE 100C BOCA RATON, FL 33431	Mailing Address 2300 GLADES ROAD SUITE 100C BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE



01172006 No Chg-LP CR2E003 (11/05)

4. FEI Number 56-2466869	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RTH EQUITY LLC
 2300 GLADES ROAD
 SUITE 100E
 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

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 \$500.00
After May 1, 2006, 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.

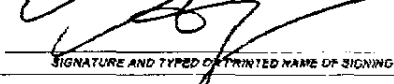
12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP	RTH EQUITY LLC 2300 GLADES ROAD BOCA RATON, FL 33431
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STAPLE CHECK HERE

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:  **William R. Greenfield**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/23/06 **561-392-6662**
Date Division Phone #