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

7

Not App	1. Entity Name	RC AT GOLDEN TRIANGL					E-ma		ED
2. Principal Place of Business - No P.O. Box # 3. Maining Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  O202207 Chg.LP CR2E003 (12/06)  City & State  City & State  City & State  City & State  A. FEI Number  Applied  \$3.75 Addition Fee Required  6. Name and Address of Current Registered Agent  Name  ROBBINS, CHARLES D ESQ. 4300 MARSH LANDING BOULEVARD 101  JACKSONVILLE BEACH, FL 32250  Site of Address (P.O. Box Number is Not Acceptable)  City  FL Zio Code  6. The above named entity sucmits this statement for the oursoes of changing its registered agent, or both, in the State of Florida. Lam familiar with, and the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOWILL 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. COCUMENT / NAME  SIRET ADDRESS  CITY ST 2P  DOCUMENT / NAME  SIRET ADDRESS  CITY ST 2P  CI	4300 MARSH 101	I LANDING BOULEVARD	4300 MARSH LANDIN 101			1 (2215) (1211 SS			
City & State  Ci	2. Principal Pl	face of Business - No P.O. Box #	3. Mailing Address						
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Addition Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  ROBBINS, CHARLES D ESQ. 4300 MARSH LANDING BOULEVARD 101  JACKSONVILLE BEACH, FL 32250  City FL Zip Code  8. The above named entity sucmits this statement for the ourbose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE  Signature Registered agent.  FILE NOWITI FEE IS \$500.00  Actor May 1, 2007, Fee will be \$900.00  A GENERAL PARTINER 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  DOCUMBIT I NOW THE RESTS GP 30, LLC  SIRET ADDRESS  FINLAY INTERESTS GP 30, LLC  SIRET ADDRESS  CITY ST 2P  DOCUMBIT I NAME  SIRET ADDRESS	Suite, Apt. #, etc.		Suite, Apt. #, etc.		02022007	Chg-LP	CR2E00	03 (12/06)	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBBINS, CHARLES D ESQ. 4300 MARSH LANDING BOULEVARD 101 JACKSONVILLE BEACH, FL 32250  City FL Zio Code  8. The above named entity submits this statement for the ourbose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  Signature Signature FILE NOWIII FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00  After May 1, 2007, Fee will be \$900.00  A GENERAL PARTINER 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  DOUBLET I NUME SIRE! ADDRESS CHANGES ONLY  SIRE! ADDRESS CHANGES ONLY  SIRE! ADDRESS CITY SI ZIP  DOCUMENT I NUME SIRE! ADDRESS CITY SI ZIP  DOCUMENT I SIRE!  DOCUMENT I NUME SIRE! ADDRESS CITY SI ZIP  DOCUMENT I SIRE!  DOCUM	City & State		City & State			4. FEI Number			✓ Applied For Not Applica
ROBBINS, CHARLES D ESQ. 4300 MARSH LANDING BOULEVARD 101  JACKSONVILLE BEACH, FL 32250  City FL Zio Code  8. The above named entity suomis this statement for the ouroosa of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE  Signature. Note: Sensition of the Ouroosa of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  FILE NOWILL 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 13. ADDRESS CHANGES ONLY  13. ADDRESS CHANGES ONLY  14. DOCUMENT / ST. ZP  15. JOHN ST. ZP  15. JOHN ST. ZP  15. JOHN ST. ZP  16. JOHN ST. ZP  17. ST. ZP  18. STREET ADDRESS  CITY ST. ZP  18. STREET ADDRESS	Zip Country		Zio Country		5. Certificate of	Status Desired		8.75 Additional ee Required	
ROBBINS, CHARLES D ESQ. 4300 MARSH LANDING BOULEVARD 101  JACKSONVILLE BEACH, FL 32250  City  FL  Zip Code  8. The above named entity susmits this statement for the ourcose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE    Signature lipitory present cover 1/1/24/5/16/25/01/25/07   A GENERAL PARTINER 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 filled to change a general partner.  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY  DOCUMENT / NAME SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS CITY ST 2P  DOCUMENT / NAME SIRET ADDRESS CITY ST 2P		6. Name and Address of Curren	t Registered Agent			7. Name and A	ddress of New R	egistered A	gent
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  12. 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 / INJA  BINILAY INTERESTS GP 30, LLC  STREET ADDRESS  CITY-ST-ZP  DOCUMENT / INJA  STREET ADDRESS  CITY	4300 MARSH LANDING BOULEVARD								
8. The above named entity sucmiss this statement for the ourcose of changing its registered agent. or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE    Signature   North   No		VILLE BEACH, FL 32250						· <u> </u>	
THE obligations of registered agent.  SIGNATURE  Signature update protecting accordagement to coopeage.  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 filled to change a general partner.  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY  DOCUMENT J LO1000015513  FINLAY INTERESTS GP 30, LLC STREET ADDRESS CITY-ST-ZIP JOCUMENT J JACKSONVILLE BEACH, FL 32250  DOCUMENT J JACKSONVILLE BEACH J JACKSON J				City				FL	Zip Code
FILE NOWILL FEE IS \$500.00  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 13. ADDRESS CHANGES ONLY  OCCUMENT / NAME  FINLAY INTERESTS GP 30, LLC  STREET ADDRESS  CITY ST ZIP  OCCUMENT / NAME  STREET ADDRESS  CITY ST ZIP			for the ourbose of changing it	is register	ed office or register	ed agent, or both.	in the State of Flo	orida, Iam fa	amiliar with, and acco
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  OCCUMENT I LO1000015513 FINLAY INTERESTS GP 30, LLC 4300 MARSH LANDING BOULEVARD CITY-ST-ZP JACKSONVILLE BEACH, FL 32250  OCCUMENT I MAME STREET ADDRESS CITY-ST-ZP CI	SIGNATURE -	Signature, typed or printed name of registered age	mand Ite fappleable.					DATE	
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  COCUMENT / INJURIER STS GP 30, LLC  4300 MARSH LANDING BOULEVARD GITY-ST-ZIP  CITY-ST-ZIP  CI		FILE NO	Will FEE IS \$500.00 2007, Fee will be \$90	00.00					
12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY  DOCUMENT / NAME STREET ADDRESS FINLAY INTERESTS GP 30, LLC 4300 MARSH LANDING BOULEVARD CITY-ST-ZIP  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP  CITY ST-ZIP	· · · · · · · · · · · · · · · · · · ·	A GENERAL PARTNER	THAT IS A BUSINESS E	NTITY M					
RAME STREET ADDRESS CITY-ST-ZIP  DOCUMENT # RAME STREET ADDRESS CITY-ST-ZIP	12.			_	i, all alliellomen	it must be med			
STREET ADDRESS CITY-ST-ZIP  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP  CITY ST ZIP		1		STRI	ET ADORESS				
NAME STREET ADDRESS CITY ST ZIP  DOCUMENT / NAME STREET ADDRESS CITY ST ZIP  CITY ST ZIP  DOCUMENT / NAME STREET ADDRESS CITY ST ZIP	STREET ADDRESS	4300 MARSH LANDING BOULI	EVARD	CITY	ST ZIP				
CITY-ST-ZIP  DOCUMENT # NAME  STREET ADDRESS CITY-ST-ZIP  DOCUMENT # NAME  STREET ADDRESS CITY-ST-ZIP  CITY ST ZIP				STRI	ET ADDRESS	20	<u></u>	411:	9 <b>9</b> 9
NAME STREET ADDRESS CITY - ST - ZIP  DOCUMENT / NAME STREET ADDRESS CITY - ST - ZIP  CITY ST - ZIP	STREET ADDRESS			CITY	ST ZIP	05/29/	/0701004	1022	**500.00
CITY ST ZIP  DOCUMENT / NAME  STREET ADDRESS  CITY ST ZIP	t t			STRI	ET ADDRESS				
RAME STREET ADDRESS CITY - ST - ZIP  DOCUMENT / NAME STREET ADDRESS CITY ST ZIP  CITY ST ZIP  CITY ST ZIP				CITY	ST ZIP				
CITY-ST-ZIP  DOCUMENT / NAME  STREET ADDRESS  CITY ST ZIP  CITY ST ZIP				STRI	ET ADDRESS				
NAME STREET ADDRESS CITY ST. 7/P	į.			CITY	ST ZIP	_			
CITY ST 7/P	Į.			STR	EET ADDRESS				
	i			CITY	ST ZIP				
DOCUMENT 4 STREET ADDRESS NAME				STR	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	1			СІТУ	'ST ZIP				dec
14. I hereby certify that the information supplied with thisting does not quality for the exemptions contained in Chapter 119, Florida Statules. I turther certify that the information this report is true and accurate a plant my signature shall have the same legal effect as if made under path, that I am a General Partner of the limited partner of the receiver or trustee employed to be exercised to be expected as a quiried by Chapter 620. Florida Statules	indicated	on this report is true and accurate a	in this Ung does not quarty hat my signature shall have e his report as required by C	y for the e e the sam Chapter 62	e legal effect as if m 0. Florida Statutes	nade under oath;	Florida Statutes. that I am a Gener	I further cert ral Partner of	tity that the information the limited partnersh
SIGNATURE: SIGNATURE AND TYPED OUR RITED NAME OF SONING GENERAL PARTNER Day! TO Day! TO Propose &	SIGNAT	URE: SIGNATURE AND TYPED	OF RINTED NAME OF SONING GENE	Shr.		· Finlay	4/12/0		