


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
05 APR 12 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A17374		
1. Entity Name ORANGE CITY RRH, LTD.		

Principal Place of Business 11635 N.W. 1ST AVENUE GAINESVILLE, FL 32607	Mailing Address 11635 N.W. 1ST AVENUE GAINESVILLE, FL 32607
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01182005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-2439594	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CURTIS, JOHN M. 11635 N. W. 1ST AVENUE GAINESVILLE, FL 32607		Name Street Address (P.O. Box Number is Not Acceptable) City	
		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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.


9. Capital Contributions as Shown on record. \$0.00	10. Amount of Capital Contributions in FLORIDA to date.
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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	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	CURTIS, JOHN M.	CITY - ST - ZIP	
STREET ADDRESS	11635 N.W. 1ST AVENUE		
CITY - ST - ZIP	GAINESVILLE, FL		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	CURTIS, GAIL W.	CITY - ST - ZIP	
STREET ADDRESS	11635 N.W. 1ST AVENUE		
CITY - ST - ZIP	GAINESVILLE, FL		
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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.

SIGNATURE:  **John M. Curtis**
General Partner 3/8/05 352-332-0838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #