

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A19304

1. Entity Name
BENTWOOD VILLAS RRH, LTD.

FILED
01 APR -9 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 11635 NW 1ST AVENUE, GAINESVILLE FL 32607
Mailing Address: 11635 NW 1ST AVENUE, GAINESVILLE FL 32607



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2548006		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		XX \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
CURTIS, GAIL W. 11635 N. W. 1ST AVENUE GAINESVILLE, FLA. 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record.	\$0.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	ANDREWS, RICHARD	STREET ADDRESS	
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	
STREET ADDRESS	GAINESVILLE FL		
CITY-ST-ZIP			
DOCUMENT #	GRAY, STEVEN H.	STREET ADDRESS	600004045336--1
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	-04/23/01--01158--013
STREET ADDRESS	GAINESVILLE FL		***150.00 ***150.00
CITY-ST-ZIP			
DOCUMENT #	CURTIS, GAIL W.	STREET ADDRESS	
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	
STREET ADDRESS	GAINESVILLE FL		
CITY-ST-ZIP			
DOCUMENT #	CURTIS, JOHN M.	STREET ADDRESS	
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	
STREET ADDRESS	GAINESVILLE FL		
CITY-ST-ZIP			
DOCUMENT #	BUTLER, GWENDA SUE	STREET ADDRESS	
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	
STREET ADDRESS	GAINESVILLE FL		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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** 03-13-01 352-332-0838
General Partner Date Daytime Phone #

CR2E003 (11/00)