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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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2002 UNIFORM BUSINESS REPORT (UBF	3
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DOCUMENT #	A19304
4 Entitu Nome	

BENTWOOD VILLAS RRH, LTD.

Principal Place of Business

Mailing Address

11635 NW 1ST AVENUE GAINESVILLE FL 32607

11635 NW 1ST AVENUE GAINESVILLE FL 32607

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	-

Zip

**DUE BY MAY 1, 2002** 

4. FEI Number

5. Certificate of Status Desired

59-2548006

7. Name and Address of New Registered Agent

Applied For Not Applicable

6. Name and Address of Current Registered Agent

Country

Country

Street Address (P.O. Box Number is Not Acceptable)

CURTIS, GAIL W. 11635 N. W. 1ST AVENUE GAINESVILLE, FLA. FL 32607

City

Name

FL

Zip Code

\$8.75 Additional

Fee Required

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

Ζiρ

SIGNATURE 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.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be ch

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ANDREWS, RICHARD 11635 NW 1ST AVENUE GAINESVILLE FL	STREET ADDRESS	AUDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GRAY, STEVEN H. 11635 NW 1ST AVENUE GAINESVILLE FL	STREET ADDRESS CITY-ST-ZIP	<b>8000053496586</b> -04/25/0201075019
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CURTIS, GAIL W. 11635 NW 1ST AVENUE GAINESVILLE FL	STREET ADDRESS	****150.00 ****150.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CURTIS, JOHN M. 11635 NW 1ST AVENUE GAINESVILLE FL	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BUTLER, GWENDA SUE 11635 NW 1ST AVENUE GAINESVILLE FL	STREET ADDRESS	
DÖĞUMENT # NÂME STREÉT ADDRESS CITY-ST-ZIP		STREET ADDRESS	

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

3/21/02

352-332-0838