


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A19304 1. Entity Name BENTWOOD VILLAS RRH, LTD.	
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Principal Place of Business 11635 NW 1ST AVENUE GAINESVILLE, FL 32607	Mailing Address 11635 NW 1ST AVENUE GAINESVILLE, FL 32607
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

FILED
 08 APR -4 AM 10: 09
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



02252008 Chg-LP CR2E003 (12/06)

4. FEI Number 59-2548006	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

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

BK

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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	
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	400122423154
NAME	11635 NW 1ST AVENUE	CITY-ST-ZIP	04/07/08--01014--007 **508.75
STREET ADDRESS	GAINESVILLE FL,		
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			

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: *John M. Curtis* **John M. Curtis** **General Partner** **02/25/08** **352-332-0838**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #