

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **A19304**



1. Entity Name
BENTWOOD VILLAS RRH, LTD.

FILED
03 APR 18 AM 9:15
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



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-2548006**

Applied For
Not Applicable

DUE BY MAY 1, 2003

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, 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. 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.

11. **MAKE CHECK PAYABLE TO FL. 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 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	CITY - ST - ZIP	STREET ADDRESS	CITY - ST - ZIP
	ANDREWS, RICHARD	11635 NW 1ST AVENUE	GAINESVILLE FL		
	GRAY, STEVEN H.	11635 NW 1ST AVENUE	GAINESVILLE FL		
	CURTIS, GAIL W.	11635 NW 1ST AVENUE	GAINESVILLE FL		
	CURTIS, JOHN M.	11635 NW 1ST AVENUE	GAINESVILLE FL		
	BUTLER, GWENDA SUE	11635 NW 1ST AVENUE	GAINESVILLE FL		

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: **SIGNATURE REQUIRED** John M. Curtis
General Partner 04/14/03 352-332-0838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)