

2002 UNIFORM BUSINESS REPORT (UBR)

0007464 AT

DOCUMENT # A26074
 1. Entity Name
COLONY COURT RRH LTD.

FILED

02 APR 30 PM 3:10

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business: **20721 S.W 46TH AVE. NEWBERRY FL 32669**
 Mailing Address: **20721 S.W 46TH AVE. NEWBERRY FL 32669**

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

City & State

DUE BY MAY 1, 2002
 4. FEI Number: **59-2838666**
 Applied For: Not Applicable:

City & State

Zip: Country

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
DAVIS, NORITA V
20721 S.W 46TH AVE.
NEWBERRY FL 32669

7. Name and Address of New Registered Agent
 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.

9. Capital Contributions as Shown on record: **\$384,200.00**

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 changed on the form; an amendment must be filed to change a general partner.

| 12. GENERAL PARTNER INFORMATION | |
|---------------------------------|-----------------------------------|
| DOCUMENT # | |
| NAME | BROWN, LEWIS JR. |
| STREET ADDRESS | 4020 NEWBERRY RD. STE. 500 |
| CITY-ST-ZIP | GAINESVILLE FL |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
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| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| 13. ADDRESS CHANGES ONLY | |
|--------------------------|------------------------------|
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | 000005503290--8 |
| CITY-ST-ZIP | -05/10/02--01068--001 |
| | ****535.00 ****526.25 |
| STREET ADDRESS | |
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| 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: *Lewis Brown Jr* **Lewis Brown Jr, GP 4/15/02 352 472 3952**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE