2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 28, 2006 08:00 AN Secretary of State

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11/1/1/1	TIVIL IN I	# 7300001

1. Entity Name

AFFORDABLE HOUSING OF HERNANDO RRH, LTD.



Principal Place of Business

1002 W. 23RD STREET SUITE 400

PANAMA CITY, FL 32405

Mailing Address

1002 W. 23RD STREET

SUITE 400

PANAMA CITY, FL 32405



DO NOT WRITE IN THIS SPACE

01102006 No Chg-LP CR2E003 (11/05)

7. Name and Address of New Registered Agent

4. FEI Number 59-2952870

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIPPIN, LAURETTA J 1002 W. 23RD ST.

SUITE 400

PANAMA CITY, FL, FL 32405

Street Address (P.O. BDQ) eNQTcepWeRITE IN THIS SPACE

City

Name

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 Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$500.00 After May 1, 2006, 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. CENEDAL DADINED INSCIDERATION ADDRESS CHANGES ONLY

12.	GENERAL PARTNER INFORMATION	13.
DOCUMENT # NAME	598978 ROYAL AMERICAN DEVELOPMENT, INC.	Street Address
STREET ADDRESS CITY-ST-ZIP	1002 W. 23RD ST., #400 PANAMA CITY, FL	CITY-ST-ZIP
DOCUMENT # NAME		STREET ADDRESS
STREET ADDRESS GITY-ST-ZIP		CITY+ST-ZIP
DOCUMENT / NAME		STREET ADDRESS
STREET ADDRESS CITY+ST-ZIP		CITY-ST-ZIP
DOCUMENT # NAME		STREET ADDRESS
STREET ADDRESS CITY-ST-ZIP		C#TY+S1-ZIP
DOCUMENT #		STREET ADDRESS
STREET ADDRESS CITY-ST-ZIP		CITY - ST - ZIP
DOCUMENT # NAME		STREET ADDRESS
STREET ADDRESS CITY-ST-ZIP		CHY-ST-ZIP

U00000541912 05/10/06-80079-003 508.75

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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 the exemptions as required by Chapter 620, Florida Statutes

SIGNATURE

STAPLE CHECK HERE

ITED NAME OF SIGNING GENERAL PARTNER

Lauretta J. Pippin, Secretary

4/20/06

Date

(850) 769-8981

Daytime Phone #