


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Feb 09, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A30831</b>		
1. Entity Name CRESTWOOD RRH, LTD.		

Principal Place of Business 20721 S.W. 46TH AVE. NEWBERRY, FL 32669	Mailing Address 20721 S.W. 46TH AVE. NEWBERRY, FL 32669
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01072005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3041372		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		7. Name and Address of New Registered Agent	
DAVIS, NORTIA V 20721 S.W. 46TH AVE. NEWBERRY, FL 32669		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. \$5,636,494.00	10. Amount of Capital Contributions in FLORIDA to date.
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**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 #	DAVIS, NORITA V	STREET ADDRESS	
NAME	20721 S.W. 46TH AVE.	CITY - ST - ZIP	11000000222311
STREET ADDRESS	NEWBERRY, FL 32669		02/09/05 000000 010 535.00
CITY - ST - ZIP		STREET ADDRESS	
		CITY - ST - ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
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CITY - ST - ZIP		CITY - ST - ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		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: *Nortia V. Davis*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

11000000222311  
 02/09/05 000000 010 535.00

Nortia V. Davis, General Partner

STAPLE CHECK HERE