

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JAN 24 AM 9:13

DOCUMENT # A93000000752

1. Entity Name
VICTORIA POINTE RRH, LTD.



Principal Place of Business
1343 MAIN STREET, FIFTH FLOOR
SARASOTA, FL 34236
4255 52nd PL W
BRADENTON, FL 34210

Mailing Address
4255 52ND PLACE W
BRADENTON, FL 34210



DO NOT WRITE IN THIS SPACE

01102006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
65-0429256

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANNAUSA, THOMAS J
1343 MAIN STREET, FIFTH FLOOR
SARASOTA, FL 34236
4255 52nd PL W
BRADENTON, FL
34210

**DO NOT WRITE
IN THIS SPACE**

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.

DATE

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.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
MANNAUSA, THOMAS J
1343 MAIN STREET, FIFTH FLOOR
SARASOTA, FL 34236
4255 52nd PL W
BRADENTON, FL
34210

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CITY-ST-ZIP

400065195464
02/06/06--01015--011 **508.75

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

Daytime Phone #

STAPLE CHECK HERE