

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**DOCUMENT # A98000001694**  
 1. Entity Name  
**MARIANNA HOLLY HILL RRH, LTD.**



SECRETARY OF STATE  
 DIVISION OF CORPORATE PREPARATIONS  
 06 FEB 14 AM 8:40

Principal Place of Business  
 4821 NW 13TH AVE  
 GAINESVILLE, FL 32605

Mailing Address  
 PO BOX 358626  
 GAINESVILLE, FL 32635

**DO NOT WRITE IN THIS SPACE**

02022006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3528151	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, J. ROLANDO  
 4821 NW 13TH AVE  
 GAINESVILLE, FL 32605

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
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.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	
NAME	SANCHEZ, J. ROLANDO
STREET ADDRESS	4821 NW 13TH AVE
CITY-ST-ZIP	GAINESVILLE, FL 32605
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

800066807998  
 02/28/06--01025--012 \*\*508.75

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

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:** J. Rolando Sanchez **J. ROLANDO SANCHEZ** 2-2-06 352-378-5454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #