


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 04 MAR -2 PM 3:12

DOCUMENT # A99000001054		
1. Entity Name RWH LIMITED		

Principal Place of Business 2217 GULF SHORE BLVD. N., APT. 2B NAPLES, FL 34102	Mailing Address 2217 GULF SHORE BLVD. N., APT. 2B NAPLES, FL 34102
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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



02242004 Chg-LP CR2E003 (10/03)

4. FEI Number 31-1659212		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HANCOCK, ROBERT W 2217 GULF SHORE BLVD. N., APT. 2B NAPLES, FL 34102		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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. \$98.00	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 # NAME STREET ADDRESS CITY-ST-ZIP	HANCOCK, ROBERT W TRUSTEE 2217 GULF SHORE BLVD. N., APT. 2B NAPLES, FL 34102	STREET ADDRESS CITY-ST-ZIP	120 MOORINGS PARK DRIVE, #G-203 NAPLES, FL 34105
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	HANCOCK, ELIZABETH A TRUSTEE 2217 GULF SHORE BLVD. N., APT. 2B NAPLES, FL 34102	STREET ADDRESS CITY-ST-ZIP	120 MOORINGS PARK DRIVE, #G-203 NAPLES, FL 34105
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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: Robert W Hancock Date: 2/26/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE