

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

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

DOCUMENT # A00000001874

1. Entity Name
RDP PARTNERS, LTD.



Principal Place of Business _____ Mailing Address _____
C/O WILLOW LAKE ESTATES C/O WILLOW LAKE ESTATES
285 N.E. 48TH STREET 285 N.E. 48TH STREET
POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064

2. Principal Place of Business _____ 3. Mailing Address _____

Suite, Apt. #, etc. _____ Suite, Apt. #, etc. _____

City & State _____ City & State _____

Zip _____ Country _____ Zip _____ Country _____



01042005 Chg-LP CR2E003 (10/03)

4. FEI Number **65-1096760** Applied For _____
 Not Applicable _____

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

M & W AGENTS, INC.
2101 CORPORATE BLVD., STE 107
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

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 file if applicable

9. Capital Contributions as Shown on record. **\$20,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$4,056,381.00**

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P00000090561	STREET ADDRESS	
NAME	RDP MANAGEMENT, INC.	CITY-ST-ZIP	
STREET ADDRESS	285 N.E. 48TH ST.		
CITY-ST-ZIP	POMPANO BEACH, FL 33064		
DOCUMENT #		STREET ADDRESS	1100000219930
NAME		CITY-ST-ZIP	02/08/05-80047-011 526.25
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: *Reba Danca* **Reba Danca**
 Pres. of Corp. GP 2/2/05 954-421-3900

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