


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

**FILED
May 10, 2006 08:00 AM
Secretary of State**

| | |
|---|---|
| DOCUMENT # A28655 1. Entity Name AJA PROPERTIES NO. 6, LTD. |  |
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|---|---|
| Principal Place of Business C/O PETER LAWRENCE COMMERCIAL REAL ESTATE 4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634 | Mailing Address C/O PETER LAWRENCE COMMERCIAL REAL ESTATE 4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634 |
|---|---|



03132006 No Chg-LP CR2E003 (11/05)

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| | |
|---|--------------------------------|
| 4. FEI Number 65-0132098 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent PETER LAWRENCE COMMERCIAL REAL ESTATE, INC 4710 EISENHOWER BLVD. SUITE C-1 TAMPA, FL 33634-6334 |
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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 # | K94115 |
| NAME | THE RED & GREY 75TH CORPORATION |
| STREET ADDRESS | 4710 EISENHOWER BLVD., SUITE C-1 |
| CITY - ST - ZIP | TAMPA, FL 336346334 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| DOCUMENT # | |
| NAME | |
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| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

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05/20/06-80030-003 500.00

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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: Kristopher Hoover 3/13/06 813-889-8855
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #