

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000001874

1. Entity Name

RDP PARTNERS, LTD.

FILED

01 MAR -9 PM 12:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

c/o Willow Lake Estates

3. Mailing Address

c/o Willow Lake Estates

Suite, Apt. #, etc.

285 N.E. 48 Street

Suite, Apt. #, etc.

285 N.E. 48 Street

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

4. FEI Number

☒ Applied For  
☐ Not Applicable

DO NOT WRITE IN THIS SPACE

Zip 33064

Country USA

Zip 33064

Country USA

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., Suite 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.

SIGNATURE M & W Agents, Inc.  
Charles Rubin, VP

(NOTE: Registered Agent signature required when reinstating)

2/28/01  
DATE

9. Capital Contributions  
as Shown on record.

\$20 million

10. Amount of Capital Contributions  
in FLORIDA to date.

\$8,500,000

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

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 # P00000090561  
NAME RDP Management, Inc.  
STREET ADDRESS 285 N.E. 48 Street  
CITY-ST-ZIP Pompano Beach, FL 33064

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

200003831032--0  
03/12/01 01115-018  
\*\*\*\*526.25 \*\*\*\*526.25

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

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CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Reba Danca,  
Pres. of Corporate GP

2/28/01

Date

(954) 421-3900

Daytime Phone #

CR2E003 (1/00)