

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 APR -1 AM 10:46

DOCUMENT # A00000001191

1. Entity Name  
THE RDB FAMILY LIMITED PARTNERSHIP



Principal Place of Business  
6560 CHARDONNAY  
PENSACOLA, FL 32504

Mailing Address  
6560 CHARDONNAY  
PENSACOLA, FL 32504

2. Principal Place of Business

3. Mailing Address

Suite Apt # etc

Suite Apt # etc

02182004 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number  
74-2969086

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAROCO, RITA D  
6560 CHARDONNAY  
PENSACOLA, FL 32504

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record \$454,066.00

10. Amount of Capital Contributions  
in FLORIDA to date

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  
BAROCO, RITA D TRUSTEE  
6560 CHARDONNAY  
PENSACOLA, FL 32504

STREET ADDRESS

CITY-ST-ZIP

900050092139  
04/20/05--01001 000 \$4526.25

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STREET ADDRESS

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:

Rita D. Baroco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/28/05

Date

850-494-0867

Daytime Phone #

STAPLE CHECK HERE