

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000001555

1. Entity Name
DUJON PROPERTIES, LTD.



Principal Place of Business
**22515 W. NEWBERRY RD.
NEWBERRY, FL 32669**

Mailing Address
**ANTHONY J. SALZMAN, ESQ., MOODY & SALZMAN
500 E UNIVERSITY AVE SUITE A
GAINESVILLE, FL 32601**



04052006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
59-3672963

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SALZMAN, ANHTONY J ESQ
MOODY & SALZMAN PA
500 E UNIVERSITY BLVD SUITE A
GAINESVILLE, FL 32601**

**DO NOT WRITE
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

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

DATE

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 # **P98000084692**
NAME **FENCE MANAGEMENT INC**
STREET ADDRESS **P.O. BOX 1320**
CITY-ST-ZIP **NEWBERRY, FL 32669**

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U00000496797
04/22/06-80028-014 500.00

**DO NOT WRITE
IN THIS SPACE**

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: *Anthony J. Salzman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/6/06

352-422-3550
Date Daytime Phone #