

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

05 APR 19 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SHIMMERING LAKE CT

DOCUMENT # A00000001913



1. Entity Name
DOUBLE J HOLDINGS, LTD.

Principal Place of Business
14031 SHIMMING LAKE CT.
FT. MYERS, FL 33907

Mailing Address
14031 SHIMMING LAKE CT.
FT. MYERS, FL 33907

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04142005 Chg-LP CR2E003 (10/03)

4. FEI Number

65-1087677

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PASTERNAK, ROBERT
14031 SHIMMING LAKE CT.
FT. MYERS, FL 33907

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

14031 Shimmering Lake Ct.

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. \$90.00

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

DOCUMENT #
NAME PASTERNAK, ROBERT
STREET ADDRESS 14031 SHIMMING LAKE CT.
CITY-ST-ZIP FT. MYERS, FL 33907

DOCUMENT #
NAME PASTERNAK, EILEEN
STREET ADDRESS 14031 SHIMMING LAKE CT.
CITY-ST-ZIP FT. MYERS, FL 33907

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 14031 Shimmering Lake Ct.
CITY-ST-ZIP

STREET ADDRESS 14031 Shimmering Lake Ct.
CITY-ST-ZIP

STREET ADDRESS 200054019792
CITY-ST-ZIP 05/06/05--01068--027 **141.25

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/15/05

Date

Daytime Phone #

STAPLE CHECK HERE