


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 10 AM 10:49

DOCUMENT # A03000001633				DIVISION OF CORPORATIONS	
1. Entity Name PJFN INVESTORS LIMITED PARTNERSHIP		06 MAR 10 AM 10:49			
Principal Place of Business 108 WINDSOR POINT DRIVE PALM BEACH GARDENS, FL 33418		Mailing Address 108 WINDSOR POINT DRIVE PALM BEACH GARDENS, FL 33418			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02102006 Chg-LP CR2E003 (11/05)	
City & State		City & State		4. FEI Number 45-0528019	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FISCH, GILBERT R 108 WINDSOR POINTE DRIVE PALM BEACH GARDENS, FL 33418				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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS	300068093693 03/20/06--01015--013 **500.00	
STREET ADDRESS	108 WINDSOR POINT DRIVE		CITY-ST-ZIP		
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418				
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	FISCH, MARCIA V				
CITY-ST-ZIP	108 WINDSOR POINT DRIVE		CITY-ST-ZIP		
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418				
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STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP		
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: Gilbert R. Fisch			2/27/06 561) 799-651		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		