

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 APR 18 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # A03000001760
1. Entity Name
RD & MD FAMILY INVESTMENTS, LIMITED PARTNERSHIP

Principal Place of Business 772 BIRD BAY DRIVE N #101 VENICE, FL 34285 US	Mailing Address 772 BIRD BAY DRIVE N #101 VENICE, FL 34285 US
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03062005 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 31-1327720	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
BETTERTON, GREG A
981 RIDGEWOOD AVENUE
#101
VENICE, FL 34285

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. I am familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as shown on record. **\$500,000**
original filing

10. Amount of Capital Contributions in FLORIDA to date. **\$500,000**

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	DICKSON, RALPH D
STREET ADDRESS	772 BIRD BAY DRIVE N #101
CITY-ST-ZIP	VENICE, FL 34285
DOCUMENT #	
NAME	DICKSON, MARTHA A
STREET ADDRESS	772 BIRD BAY DRIVE N #101
CITY-ST-ZIP	VENICE, FL 34285
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	400052116164 04/26/05--01051--001 **526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

11. 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: *Ralph P. Dickson* Date: **3/28/05** Daytime Phone #: **941-412-0431**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
RALPH P. DICKSON

STAPLE CHECK HERE

(A) Ralph Dickson call 3/28/05