

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 17 AM 11:37

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



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02082008

Chg-LP

CR2E003 (12/06)

4. FEI Number
 31-1327720

Applied For
 Not Applicable

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

DICKSON, RALPH D
 772 BIRD BAY DR N
 #101
 VENICE, FL 34285

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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
 CITY-ST-ZIP

DICKSON, RALPH D
 772 BIRD BAY DRIVE N #101
 VENICE, FL 34285

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

DICKSON, MARTHA A
 772 BIRD BAY DRIVE N #101
 VENICE, FL 34285

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
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 CITY-ST-ZIP

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STREET ADDRESS
 CITY-ST-ZIP

600123844876
 04/17/08--01006--008 **500.00

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:

Ralph D Dickson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/14/08

Date

877-266-6114

Daytime Phone #

STAPLE CHECK HERE