


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 APR 24 AM 10:56

|                                                           |                                                                                   |
|-----------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # A05000000474                                   |  |
| 1. Entity Name<br>RONTO BEACH ROAD DEVELOPMENTS TWO, LTD. |                                                                                   |

|                                                                                          |                                                                              |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Principal Place of Business<br>3185 HORSEHOE DRIVE SOUTH FIRST FLOOR<br>NAPLES, FL 34104 | Mailing Address<br>3185 HORSEHOE DRIVE SOUTH FIRST FLOOR<br>NAPLES, FL 34104 |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|

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

|                                  |                                                                                            |
|----------------------------------|--------------------------------------------------------------------------------------------|
| 03202006 Chg-LP CR2E003 (11/05)  |                                                                                            |
| 4. FEI Number                    | <input checked="" type="checkbox"/> Applied For<br><input type="checkbox"/> Not Applicable |
| 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        |
| BLOOM, KEN E<br>3185 HORSEHOE DRIVE SOUTH FIRST FLOOR<br>NAPLES, FL 34104 | 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.

**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 #                      | P05000029167                            | STREET ADDRESS           |                               |
| NAME                            | RONTO BEACH ROAD DEVELOPMENTS ONE, INC. | CITY-ST-ZIP              |                               |
| STREET ADDRESS                  | 3185 HORSEHOE DRIVE SOUTH FIRST FLOOR   |                          |                               |
| CITY-ST-ZIP                     | NAPLES, FL 34104                        |                          |                               |
| DOCUMENT #                      |                                         | STREET ADDRESS           | 500074753665                  |
| NAME                            |                                         | CITY-ST-ZIP              | 05/17/06--01012--020 **500.00 |
| STREET ADDRESS                  |                                         |                          |                               |
| CITY-ST-ZIP                     |                                         |                          |                               |
| DOCUMENT #                      |                                         | STREET ADDRESS           |                               |
| NAME                            |                                         | CITY-ST-ZIP              |                               |
| STREET ADDRESS                  |                                         |                          |                               |
| CITY-ST-ZIP                     |                                         |                          |                               |
| DOCUMENT #                      |                                         | STREET ADDRESS           |                               |
| NAME                            |                                         | CITY-ST-ZIP              |                               |
| STREET ADDRESS                  |                                         |                          |                               |
| CITY-ST-ZIP                     |                                         |                          |                               |
| DOCUMENT #                      |                                         | STREET ADDRESS           |                               |
| NAME                            |                                         | CITY-ST-ZIP              |                               |
| STREET ADDRESS                  |                                         |                          |                               |
| 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: KE BL Kenneth E. Bloom 4-9-06 234-644-6310  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE