2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000001217

Entity Name: DJPS LIMITED PARTNERSHIP

FILED Jan 09, 2009 Secretary of State

| Current Principal Place of Business: | | New Principal Place o | New Principal Place of Business: | |
|--|--------------------------------------|---|-------------------------------------|--|
| 3971 GULF SHORE BI PH 302 | LVD N. | | | |
| NAPLES, FL 34103 | US | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 3971 GULF SHORE BLVD N. PH 302 | | | | |
| NAPLES, FL 34103 | US | | | |
| FEI Number: 20-3025258 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | | |
| SACHS, NED R 3971 GULF SHORE BI PH 302 NAPLES, FL 34103 U | | | | |
| The above named entition the State of Florida. | ty submits this statement for the pu | urpose of changing its registered | office or registered agent, or both | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Agent | | nt | Date | |
| GENERAL PARTNER INFORMATION: | | ADDRESS CHANGES ONLY | : | |

Document #: L05000055336

Name: MWD, LLC

 Address:
 3971 GULF SHORE BLVD N. PH 302
 Address:

 City-St-Zip:
 NAPLES, FL 34103 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: NED R SACHS MGR 01/09/2009