

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

DOCUMENT # A05000001720

1. Entity Name

**A. RONALD HUDSON & DAVID JACKSON APARTMENTS
LTD**



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 17 AM 8:25

Principal Place of Business

**4640 58TH AVENUE
VERO BEACH FL 32967
US**

Mailing Address

**4640 58TH AVENUE
VERO BEACH FL 32967
US**

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

☒ 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

**HUDSON, A. RONALD
4640 58TH AVENUE
VERO BEACH FL 32967**

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

A. Ronald Hudson A. Ronald Hudson

2/28/06

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

DATE

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 #		STREET ADDRESS	
NAME	HUDSON, A. RONALD	CITY - ST - ZIP	
STREET ADDRESS	4640 58TH AVENUE		
CITY - ST - ZIP	VERO BEACH FL 32967		
DOCUMENT #		STREET ADDRESS	
NAME	JACKSON, DAVID JR.	CITY - ST - ZIP	
STREET ADDRESS	4145 28TH AVENUE		
CITY - ST - ZIP	VERO BEACH FL 32967		
DOCUMENT #		STREET ADDRESS	600069543376
NAME		CITY - ST - ZIP	04/05/06--01038--004 **500.00
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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:

A. Ronald Hudson
A. Ronald Hudson

2/28/06 (772)567-7290

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE