


2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007

DOCUMENT # A05000001720			
1. Entity Name A. RONALD HUDSON & DAVID JACKSON APARTMENTS LTD			
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 - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent HUDSON, A. RONALD 4640 58TH AVENUE VERO BEACH FL 32967		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			

FILED

2007 APR 23 AM 11:01

SECRETARY OF STATE



1st MOORE CR2E003 (10/06)

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

FILE NOW!!! Fee is \$500. * After May 1, 2007, 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 #	NAME	STREET ADDRESS	
NAME	HUDSON, A. RONALD	CITY- ST- ZIP	
STREET ADDRESS	4640 58TH AVENUE		
CITY- ST- ZIP	VERO BEACH FL 32967		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	JACKSON, DAVID JR.	CITY- ST- ZIP	
STREET ADDRESS	4145 28TH AVENUE		
CITY- ST- ZIP	VERO BEACH FL 32967		
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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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

February 10, 2007 (772) 567-7290
Date Daytime Phone #

STAPLE CHECK HERE