

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

CO#	GL#	SUBJECT	AMOUNT
10		APR 25 2006 08:00 AM	
SECRETARY OF STATE			
8130 SP			
APPROVAL	Ceb	TOTAL	600.00
			DATE

DOCUMENT # A15810	
1. Entity Name RMF JUPITER APARTMENTS, LTD.	
Principal Place of Business	Mailing Address
631 US HWY 1 STE 406 NORTH PALM BEACH, FL 33408	631 US HWY 1 STE 406 NORTH PALM BEACH, FL 33408



04042006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 31-1082075	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

MACKEY, WALTER J., JR.  
 631 US HWY 1  
 STE 406  
 NORTH PALM BEACH, FL 33408

**DO NOT WRITE IN THIS SPACE**

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**

DOCUMENT #	857747
NAME	R.M.F. PROPERTIES, INC.
STREET ADDRESS	631 US HWY 1
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000533010  
 05/06/06-80105-018 500.00

**DO NOT WRITE IN THIS SPACE**

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: *Edward Williams* *Edward Williams*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER *Secretary G.P* Date *4/24/06* Daytime Phone # \_\_\_\_\_

STAPLE CHECK HERE