2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Apr 12, 2007 08:00 AM Secretary of State

DOCL	JMEN1	Γ#Α:	32121

1. Entity Name
JDRP ASSOCIATES NO. 2, LTD.



Principal Place of Business

STREET ADDRESS CITY-ST-ZIP

% THE PETER LAWRENCE COMPANY, INC. 4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634

Mailing Address

% THE PETER LAWRENCE COMPANY, INC. 4710 EISENHOWER BLVD., SUITE C-1 TAMPA, FL 33634



DO NOT WRITE IN THIS SPACE

01292007 No Chg-LP

01292007 No Chg-LP	CR2	E003 (12/06)
4. FEI Number		Applied For
59-3089784		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABRAMS, ALLAN 4710 EISENHOWER BLVD., SUITE C-1 TAMPA. FL 33634-6334

DO NOT WRITE IN THIS SPACE

TAMPA, FL 33634-6334		IN THIS SPACE		
	named entity submits this statement for the purpose of changing its re- ions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE -	Signature, typed or printed name of registered agent and title if applicable	DATE		
	FILE NOW!!! FEE 1S \$500.00 After May 1, 2007, Fee will be \$900.0	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 #	A32117			
NAME STREET ADDRESS	JDRP 79TH AVE. ASSOCIATES, L.P. 4710 EISENHOWER BLVD., STE. C-1			
CITY-ST-ZIP	TAMPA, FL 33634			
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		U00000700697 04/20/07-80030-002 500.00		
DOCUMENT #				
NAME STREET ADDRESS		DO NOT WRITE		
CITY-ST-ZIP		DO NOT WRITE		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
DOCUMENT#				
NAME				
STREET ADDRESS CITY-ST-ZIP				
DOCUMENT /				

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: Kristopher Hoover 02/28/07 813-88 -8855