

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # A32458

1. Entity Name
TARDIF FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**7800 W. OAKLAND PARK BLVD
BLDG. "G"
SUNRISE, FL 33351**

Mailing Address
**7800 W. OAKLAND PARK BLVD
BLDG. "G"
SUNRISE, FL 33351**



03092006 No Chg-LP

CRZE003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0417768

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**LAPIERRE, REJEAN
7800 W. OAKLAND PARK BLVD., BLDG "G"
SUNRISE, FL 33351**

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

000000495727
04/21/06-80021-010 500.00

DATE

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**TARDIF, GASTON
7800 W. OAKLAND PARK BLVD
SUNRISE, FL 33351**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**TARDIF, JEROME
7800 W. OAKLAND PARK BLVD
SUNRISE, FL 33351**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

**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: Gaston Tardif
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03/10/06
Date

Daytime Phone #

STAPLE CHECK HERE