2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A32714

1. Entity Name JDRP-NW12 ASSOCIATES, L.P., LETT-



FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS

06 MAY -1 AM 10: 47

Principal Place of Business

4710 EISENHOWER BOULEVARD TAMPA, FL 33634

Mailing Address

4710 EISENHOWER BOULEVARD TAMPA, FL 33634



DO NOT WRITE IN THIS SPACE

03132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-3110491

Applied For 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

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.		
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 #	P37987	
NAME	NW12 CORP.	
STREET ADDRESS	4710 EISENHOWER BLVD., STE C-1	
CITY-ST-ZIP	TAMPA, FL 33634	
DOCUMENT #		
NAME		200074702002
STREET ADDRESS		200074702952 05/17/0601007013 **500,00
CITY-ST-ZIP		00,11,00 0100; 017 ***000,00
DOCUMENT #		
NAME		DO NOT WOITE
STREET ADDRESS		DO NOT WRITE
CITY-ST-ZIP		IN THIS SPACE
DBCUMENT #		IN THIS STACE
NAME		
STREET ADDRESS CITY-ST-ZIP		
DOCUMENT / NAME		
STREET ADDRESS		
SINCEL AUDNESS		
DOCUMENT / NAME		
STREET ADDRESS		
CITY-ST-ZIP		
J J. L	<u> </u>	

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:

STAPLE CHECK HERE