

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 JUN -2 AM 9:46

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



04122006 Chg-LP CR2E003 (11/05)

4. FEI Number **65-0558809** Applied For ☐ Not Applicable

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

DOCUMENT # A95000000236

1. Entity Name
RDJD HOLDINGS, LTD.



Principal Place of Business
**411 WEST INDIANTOWN ROAD
JUPITER, FL 33458**

Mailing Address
**411 WEST INDIANTOWN ROAD
JUPITER, FL 33458**

2. Principal Place of Business

3. Mailing Address

2185 Radnor Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Juno Isles FL

Zip

Country

Zip

Country

33408

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NOWICKI, MARK J
14155 U.S. HIGHWAY ONE, SUITE 302
JUNO BEACH, FL 33408-1499**

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

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

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P04000069751**
NAME **RDJD INVESTMENTS, INC.**
STREET ADDRESS **2185 RADNOR COURT**
CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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:

Deane Surawitz

4/12/06 561 746-7811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE