

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

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A98000002912**

1. Entity Name  
**DDR CAVALIERS LIMITED**



Principal Place of Business  
**179 BRADLEY PLACE  
PALM BEACH, FL 33480**

Mailing Address  
**P.O. BOX 750  
PALM BEACH, FL 33480**



01302006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0886192**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

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

**ATTERBURY, WILLIAM W III  
C/O ALLEY, MAASS, ROGERS & LINDSAY, P.A.  
321 ROYAL POINCIANA PLAZA, SOUTH  
PALM BEACH, FL 33480**

**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**

**000000475956  
04/05/06-80037-014 500.00**

**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 # **P98000107932**  
NAME **DDR CAVALIERS, INC.**  
STREET ADDRESS **179 BRADLEY PLACE**  
CITY-ST-ZIP **PALM BEACH, FL 33480**

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IN THIS SPACE**

STAPLE CHECK HERE

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:**

*David V. Reese*  
**David V. Reese**

**3/17/06**

Date

**561-838-4497**

Daytime Phone #