

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000000176

1. Entity Name
ROGERS & DAVIDSON LIMITED PARTNERSHIP



Principal Place of Business
**2321-B N.W. 41ST STREET
GAINESVILLE, FL 32606**

Mailing Address
**2321-B N.W. 41ST STREET
GAINESVILLE, FL 32606**



DO NOT WRITE IN THIS SPACE

01112006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
59-3561380

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GIONET, CLIFFORD L
2321-B N.W. 41ST STREET
GAINESVILLE, FL 32606**

**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.

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
**DAVIDSON, KIM M TRUSTEE
2321-B N.W. 41ST STREET
GAINESVILLE, FL 32606**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**ROGERS, BRUCE TRUSTEE
2321-B N.W. 41ST STREET
GAINESVILLE, FL 32606**

DOCUMENT #
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STREET ADDRESS
CITY - ST - ZIP

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1100000490826
04/18/06-80070-022 500.00

**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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

11/5/06

STAPLE CHECK HERE