

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000000253

1. Entity Name

LUDLAM PLAZA APARTMENTS, LTD.



Principal Place of Business

9095 S.W. 87TH AVENUE, SUITE 777
MIAMI, FL 33176

Mailing Address

9095 S.W. 87TH AVENUE, SUITE 777
MIAMI, FL 33176



01112006 No Chg-LF

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0893405

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PROFESSIONAL MANAGEMENT GEN. PTNRSHPS, INC
9095 S.W. 87TH AVENUE, SUITE 777
MIAMI, FL 33176

**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 date if applicable.

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

U00000469645
03/27/06-80007-024 500.00

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 # P96000099680
NAME PROFESSIONAL MANAGEMENT GEN. PTNRSHPS, INC
STREET ADDRESS 9095 S.W. 87TH AVENUE, SUITE 777
CITY-ST-ZIP MIAMI, FL 33176

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

James R. Mitchell

03/13/06

305-270-0870

STAPLE CHECK HERE