

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # A99000000820

1. Entity Name
R & D - 6 LTD.



Principal Place of Business
**5250 N. SIERRA VISTA DR.
CRYSTAL RIVER, FL 34428**

Mailing Address
**5250 N. SIERRA VISTA DR.
CRYSTAL RIVER, FL 34428**

DO NOT WRITE IN THIS SPACE



03042007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-3573756

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**APPLE, RICHARD F
5250 N. SIERRA VISTA DR.
CRYSTAL RIVER, FL 34428**

**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, 2007, 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
**APPLE, RICHARD E
5250 N. SIERRA VISTA DR.
CRYSTAL RIVER, FL 34428**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**APPLE, DONNA R
5250 N. SIERRA VISTA DR.
CRYSTAL RIVER, FL 34428**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

U00000684431
04/06/07-80032-010 500.00

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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

Date

Daytime Phone #

Richard F Apple **3/27/2007**

STAPLE CHECK HERE