


**2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2008**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 MAY -1 AM 10:13

<b>DOCUMENT # A0000001552</b>		
1. Entity Name WATERFORD PARK AT WATERFORD LAKES, LTD.		

Principal Place of Business 1768 PARK CENTER DR. SUITE 400 ORLANDO, FL 32835	Mailing Address 1768 PARK CENTER DR. SUITE 400 ORLANDO, FL 32835
---	---



04212008 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3675633	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

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

WHWW, INC.  
390 N. ORANGE AVE., SUITE 1500  
ORLANDO, FL 32801

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2008, Fee will be \$900.00**

100128283221  
05/02/08--01003--005 \*\*6175.00

**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 #	L06000076799
NAME	WATERFORD PARK GP, LLC
STREET ADDRESS	1768 PARK CENTER DR., SUITE 400
CITY-ST-ZIP	ORLANDO, FL 32835
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**

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 J. Townsend *David J. Townsend as Mgr of general partner* 4/15/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #