


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # A28640
 1. Entity Name
CLEARLAKE SQUARE PARTNERS, LTD.



Principal Place of Business Mailing Address
 %LOTHAR ESTEIN %LOTHAR ESTEIN
 5211 INTERNATIONAL DR. 5211 INTERNATIONAL DR.
 ORLANDO, FL 32819 ORLANDO, FL 32819

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Zip Country Country



01192004 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent

ESTEIN, LOTHAR
 5211 INTERNATIONAL DRIVE
 ORLANDO, FL 32819

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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.

9. Capital Contributions as Shown on record. \$2,000,000.00 10. Amount of Capital Contributions in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # K93159
 NAME WELP MANAGEMENT CORPORATION ✓
 STREET ADDRESS 5211 INTERNATIONAL DRIVE
 CITY - ST - ZIP ORLANDO, FL 32819

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **Lothar Estein** 1-28-04 (407) 354-3307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE