

**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Apr 13, 2007 08:00 AM
Secretary of State**

DOCUMENT # A99000000265

1. Entity Name
WOOLBRIGHT PROFESSIONAL BUILDING, LTD.



Principal Place of Business
2240 WOOLBRIGHT RD., SUITE 300
BOYNTON BEACH, FL 33426

Mailing Address
2240 WOOLBRIGHT RD., SUITE 300
BOYNTON BEACH, FL 33426



04042007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0895105	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

APPIGNANI, LOUIS J
2240 WOOLBRIGHT RD., SUITE 300
BOYNTON BEACH, FL 33426

**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, 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 #	P99000014194
NAME	LJA PROPERTIES, INC.
STREET ADDRESS	2240 WOOLBRIGHT RD., SUITE 300
CITY-ST-ZIP	BOYNTON BEACH, FL 33426
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000706232
04/24/07-80024-020 500.00

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: James J. Appignani 4/4/07 561-364-5500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #