


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000001357
 1. Entity Name
 WESTCHASE APARTMENT ASSOCIATES, LTD.



Principal Place of Business 359 CAROLINA AVENUE WINTER PARK, FL 32789	Mailing Address 359 CAROLINA AVENUE WINTER PARK, FL 32789
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3670461	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DOWNING, GRANT T
 222 WEST COMSTOCK AVE., SUITE 101
 WINTER PARK, FL 32789

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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, 2006, 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 #	P00000083228
NAME	EPI-WESTCHASE EQUITY, INC.
STREET ADDRESS	359 CAROLINA AVENUE
CITY-ST-ZIP	WINTER PARK, FL 32789
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000454388
 03/15/06-80014-009 500.00

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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: _____ **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER**
 Date: 1/4/06 Daytime Phone # _____