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

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A00000001552

1. Entity Name
WATERFORD PARK AT WATERFORD LAKES, LTD.

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

DO NOT WRITE IN THIS SPACE

04252007 No Chg-LP CR2E003 (12/06)

4. FEI Number		
59-3875633	☐	Applied For
	☐	Not Applicable

5. Certificate of Status Desired ☐ $8.75 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, 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 #	L06000076799
NAME	WATERFORD PARK GP, LLC
STREET ADDRESS	1768 PARK CENTER DR., SUITE 400
CITY-ST-ZIP	ORLANDO, FL 32835
DOCUMENT #	
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U00000747791
05/17/07-00040-005 500.00

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: [signature] DAVID J Townsend 4/26/07 (407)294-6400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #