

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 11 PM 1:08

DOCUMENT # A01000001514

1. Entity Name
 THE CENTRE AT WELLINGTON GREEN, LLLP



Principal Place of Business
 2515 SR 7
 #230
 WELLINGTON, FL 33414

Mailing Address
 2515 SR 7
 #230
 WELLINGTON, FL 33414

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02012008

Chg-LP

CR2E003 (12/06)

4. FEI Number
 65-1146822

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KRALL, MARK L
 616 EAST ATLANTIC AVE.
 DELRAY BEACH, FL 33483

7. Name and Address of New Registered Agent

Name

Marc Stanley

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

2515 SR 7, Suite 230

City

Wellington

FL

Zip Code

33414

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

Signature, typed or printed name of registered agent and title if applicable.

2-13-08

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 # P00000071774
 NAME CENTRE-W.G., INC.
 STREET ADDRESS 2515 SR 7, #230
 CITY-ST-ZIP WELLINGTON, FL 33414

DOCUMENT #
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 CITY-ST-ZIP

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 CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 700115543717
 03/10/08--01064--001 **500.00

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

MARC STANLEY VP Centre-W.G. Inc.

2-13-08

9544101338

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE