

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000000251

**FILED**  
**Mar 23, 2009**  
**Secretary of State**

**Entity Name:** WISE BROTHERS PROPERTIES, LTD., L.L.L.P.

**Current Principal Place of Business:**

3420 NORTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 547125  
ORLANDO, FL 327547125

**New Mailing Address:**

**FEI Number:** 59-3577208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LEFKOWITZ, IVAN M  
430 NORTH MILLS AVENUE  
ORLANDO, FL 32803 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: 171908  
Name: WISE BROTHERS, INC.  
Address: 3420 NORTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32804

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ABE O. WISE

PRES

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date