

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000001296

Entity Name: WESTWIND ASSOCIATES, LTD.

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2569 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

**Current Mailing Address:**

2569 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

**New Mailing Address:**

FEI Number: 55-0845765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WESTAFER, ANITA S  
2569 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 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 #: P03000097863  
Name: WESTWIND INVESTMENTS, INC.  
Address: 2569 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: ANITA S WESTAFER, MD

RA

04/20/2012

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

\_\_\_\_\_  
Date