


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # A04000001845 1. Entity Name WIREGRASS WEST, LTD.	
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Principal Place of Business 1515 N. RIVERHILLS DRIVE TEMPLE TERRACE, FL 33617	Mailing Address 1515 N. RIVERHILLS DRIVE TEMPLE TERRACE, FL 33617
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DO NOT WRITE IN THIS SPACE



01242007 No Chg-LP CR2E003 (12/06)

4. FEI Number 20-1932940	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 GOODWIN, JAMES W 201 N. FRANKLIN STREET, STE. 2000 TAMPA, FL 33602
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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 #	P04000159387
NAME	COOTER RIDGE VENTURES, INC.
STREET ADDRESS	1515 N. RIVERHILLS DRIVE
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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U00000606531
01/31/07-80001-004 500.00

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: *J. Don Porter* **J. Don Porter** **1/25/07** **813-980-3653**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE