

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A05000000388

1. Entity Name
 WC LAND HOLDINGS, LTD.



Principal Place of Business
 3434 COLWELL AVENUE, STE 120
 TAMPA, FL 33614

Mailing Address
 3434 COLWELL AVENUE, STE 120
 TAMPA, FL 33614

FILED

2007 APR 23 AM 10:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



03142007 Chg-LP CR2E003 (12/06)

4. FEI Number
 20-4764230

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILSON, PEYTON T
 33 E WALL STREET
 FROSTPROOF, FL 33843

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 #	P05000026708
NAME	MAXCY DEVELOPMENT GROUP, INC.
STREET ADDRESS	33 E WELL STREET
CITY-ST-ZIP	FROSTPROOF, FL 33843
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	33 E. WALL STREET
CITY-ST-ZIP	FROSTPROOF, FL 33843
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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 05/03/07 01055--008 **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: _____

Harry Lerner

3-20-2007

863-635-4804

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

C daytime Phone #

STAPLE CHECK HERE