

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000000847

**FILED**  
**Jul 16, 2007**  
**Secretary of State**

**Entity Name:** ST. AUGGIE, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

11 WEST SKIPPACK PIKE  
AMBLER, PA 19002

**New Principal Place of Business:**

**Current Mailing Address:**

11 WEST SKIPPACK PIKE  
AMBLER, PA 19002

**New Mailing Address:**

**FEI Number:** 20-2772750      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

LAPHEN, WILLIAM  
43 FULLERWOOD DRIVE  
ST AUGUSTINE, FL 32094      US

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

LAPHEN, WILLIAM  
43 FULLERWOOD DRIVE  
ST AUGUSTINE, FL 32084      US

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: WILLIAM LAPHEN

07/16/2007

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P05000061933  
Name: WOOD RICH LAND TRUST, INC.  
Address: 11 WEST SKIPPACK PIKE  
City-St-Zip: AMBLER, PA 19002

**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: WILLIAM LAPHEN

PRES

07/16/2007

Electronic Signature of Signing General Partner

Date