


**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007**

**FILED  
May 02, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # A09944</b> 1. Entity Name WOODRIDGE APARTMENTS, LTD.	
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Principal Place of Business 990 W. 15TH STREET PANAMA CITY, FL 32401	Mailing Address P.O. BOX 16689 PANAMA CITY, FL 32406
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**DO NOT WRITE IN THIS SPACE**



01102007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-2058491	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>  WHITEHEAD, CHARLES 990 W. 15TH STREET PANAMA CITY, FL 32401
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	000000757157 05/23/07-80060-001 508.75 DATE
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**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 # NAME STREET ADDRESS CITY-ST-ZIP	L01000001871 CHARLES A. WHITEHEAD, LLC 990 W. 15TH STREET PANAMA CITY, FL 32401
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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

<b>SIGNATURE:</b> 	Charles A. Whitehead	4/23/07	(850) 769-8981
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<small>Date</small>	<small>Daytime Phone #</small>

STAPLE CHECK HERE