

# **2005 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A09967

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** WILLIAMS ISLAND ASSOCIATES, LTD.

**Current Principal Place of Business:**

4000 ISLAND BOULEVARD., PH2  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

4000 ISLAND BOULEVARD., PH2  
AVENTURA, FL 33160

**New Mailing Address:**

**FEI Number:** 13-3062331

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATUS, ALAN  
4000 ISLAND BOULEVARD., PH2  
AVENTURA, FL 33160 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

**Capital Contributions as Shown on record:** 15,000.00

**Amount of Capital Contributions in Florida to date:** 15,000.00

**GENERAL PARTNER INFORMATION:**

Document #: F00000004387  
Name: WIA, INC.  
Address: 4000 ISLAND BLVD.  
City-St-Zip: AVENTURA, FL 33160

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALAN MATUS

EVP

04/29/2005

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

\_\_\_\_\_  
Date