

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAR 28 AM 8:39

DOCUMENT # A19585

1. Entity Name
ESSEX SQUARE APARTMENTS, LTD.



Principal Place of Business
C/O REX-MCGILL, INC.
940 HIGHLAND AVENUE, SUITE 100
ORLANDO, FL 32803 US

Mailing Address
C/O REX-MCGILL, INC.
940 HIGHLAND AVENUE, SUITE 100
ORLANDO, FL 32803 US



03082008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2547588

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF ORLANDO
300 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

DATE _____

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 # L0600000824
NAME WILKINSON ESSEX, LLC
STREET ADDRESS 940 HIGHLAND AVENUE, SUITE 100
CITY-ST-ZIP ORLANDO, FL 32803

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700121105017
03/25/08--01002--002 **500.00

**DO NOT WRITE
IN THIS SPACE**

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 600, Florida Statutes.

SIGNATURE: *W. K. Wilkinson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

3-14-08

STAPLE CHECK HERE