

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**DOCUMENT # A22912**

1. Entity Name  
HERITAGE PARK OF WEST DELRAY, LLLP



Principal Place of Business  
5859 HERITAGE PARK WAY  
DELRAY BEACH, FL 33484

Mailing Address  
5861 HERITAGE PARK WAY  
DELRAY BEACH, FL 33484

**FILED**

08 APR 21 PM 3:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01142008 No Chg-LP CR2E003 (12/06)

4. FEI Number  
59-2729148

Applied For
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

SCHEMEL, ROBERT G  
5861 HERITAGE PARK WAY  
DELRAY BEACH, FL 33484

**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 true and correct copy

1/14/08

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	SCHEMEL, ROBERT G.	5861 HERITAGE PARK WAY	DELRAY BEACH, FL 33484

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200123962202  
04/18/08--01008--009 \*\*508.75

**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 620, Florida Statutes.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/14/08

Date

561-496-4440

Daytime Phone #

STAPLE CHECK HERE