


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

FILED

2005 MAY -3 PM 4: 03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A23432</b>	
1. Entity Name <b>WELLINGTON ENTERPRISES, LTD.</b>	

Principal Place of Business <b>9934 TURF WAY APARTMENT 4 ORLANDO FL 32837</b>	Mailing Address <b>P.O. BOX 770669 ORLANDO FL 32877-0669</b>
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2. Principal Place of Business <b>20 N. EDLA DRIVE</b>	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

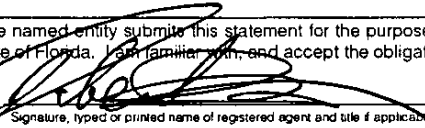
City & State <b>ORLANDO FL.</b>	City & State
Zip <b>32801</b>	Country <b>U.S.A.</b>



1ST MOORE CR2E003 (10/04)

6. Name and Address of Current Registered Agent <b>HERNANDEZ, JAIME J. 9934 TURF WAY APARTMENT 4 ORLANDO FL 32837</b>		7. Name and Address of New Registered Agent Name <b>ROBERT L. HARDING</b> Street Address (P.O. Box Number is Not Acceptable) <b>20 N. EDLA DRIVE</b> City <b>ORLANDO</b> FL Zip Code <b>32801</b>	
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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  **ROBERT L. HARDING** DATE **APRIL 18/2005**

11. FILE NOW!!! Due by May 1, 2005.  
See Block 11 instructions for fee info.


9. Capital Contributions as Shown on record. <b>\$855,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.
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**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>J37159 LEXINGTON ENTERPRISES 9934 TURF WAY, APT. 4 ORLANDO FL</b>	STREET ADDRESS CITY-ST-ZIP	<b>20 N. EDLA DRIVE ORLANDO FL, 32801</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	<b>688855375626 05/26/05--01048--010 **526.25</b>
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify 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 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:  **Jaime J. Hernandez, President of General Partner** Date **April 18/2005**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
**JAIME J. HERNANDEZ AS PRESIDENT OF GENERAL PARTNER** Daytime Phone #