


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

00088235 AT

DOCUMENT # A23432 1. Entity Name WELLINGTON ENTERPRISES, LTD.		
Principal Place of Business 9934 TURF WAY APARTMENT 4 ORLANDO FL 32837	Mailing Address P.O. BOX 770669 ORLANDO FL 32877-0669	

FILED

03 MAY -5 PM 7:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA



2. Principal Place of Business		3. Mailing Address		DUE BY MAY 1, 2003	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-2723007	
City & State		City & State		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HERNANDEZ, JAIME J. 9934 TURF WAY APARTMENT 4 ORLANDO FL 32837	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. \$855,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	J37159	STREET ADDRESS	
NAME	LEXINGTON ENTERPRISES	CITY-ST-ZIP	9934 TURF WAY, APT. 4 ORLANDO FL
STREET ADDRESS	9934 TURF WAY, APT. 4	CITY-ST-ZIP	05/05/03--01061--001 **526.25
CITY-ST-ZIP	ORLANDO FL	STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
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DOCUMENT #		CITY-ST-ZIP	
NAME		STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP		STREET ADDRESS	

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.

(407) 851-9348

SIGNATURE: Jaime J. Hernandez President of Gen. Partner April/30/2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

JAIME J. HERNANDEZ AS PRESIDENT OF GEN. PARTNER

STAPLE CHECK HERE

CR2E003 (10/02)