


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # A25490 1. Entity Name WEBSTER APARTMENTS, LTD.	
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Principal Place of Business 909-A WEST MAGNOLIA STREET LEESBURG, FL 32748	Mailing Address 909-A WEST MAGNOLIA STREET LEESBURG, FL 32748
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. —		Suite, Apt. #, etc. —	
City & State —		City & State —	
Zip	Country	Zip	Country



01052005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-2821330	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
GEORGE, LOUIS C SR. 909-A WEST MAGNOLIA STREET LEESBURG, FL 32748	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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
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9. Capital Contributions as Shown on record. \$111,461.00	10. Amount of Capital Contributions in FLORIDA to date. 111,461.00
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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	
STREET ADDRESS	GEORGE, LOUIS C	CITY-ST-ZIP	
CITY-ST-ZIP	909-A WEST MAGNOLIA ST. LEESBURG, FL		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
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STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			

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: 	Date 1-6-05	Daytime Phone # 352-787-6187
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STAPLE CHECK HERE