

# **2005 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A26567

Entity Name: WIND FALL FARM, LTD.

**FILED**  
**Feb 07, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

139TH STREET  
STARKE, FL 32610 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3497  
PONTE VEDRA BEACH, FL 32004 US

**New Mailing Address:**

FEI Number: 59-2894083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SKINNER, WILLIAM H  
PO BOX 3497  
PONTE VEDRA BEACH, FL 32004 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 413,880.00

**Amount of Capital Contributions in Florida to date:** 413,880.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: SKINNER, WILLIAM H

Address: PO BOX 3497

City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

Address:

City-St-Zip:

Document #:

Name: SKINNER, ELIZABETH B

Address: PO BOX 3497

City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ELIZABETH B SKINNER

\_\_\_\_\_  
Electronic Signature of Signing General Partner

02/07/2005

\_\_\_\_\_  
Date