


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 APR 15 PM 1:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A26575 1. Entity Name WESTLAKE PARTNERS, LTD.			
Principal Place of Business 2221 LEE RD., SUITE 28 WINTER PARK, FL 32789		Mailing Address 2221 LEE RD., SUITE 28 WINTER PARK, FL 32789	
2. Principal Place of Business 650 S. Northlake Blvd Suite, Apt. #, etc. Suite 450 City & State Altamonte Springs, FL Zip 32701		3. Mailing Address 650 S. Northlake Blvd Suite, Apt. #, etc. Suite 450 City & State Altamonte Springs, FL Zip 32701	
4. FEI Number 16-1321152		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LECCESSE, SALVADOR F 2221 LEE RD., SUITE 28 WINTER PARK, FL 32789		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 650 S. Northlake Blvd, Suite 450 City Altamonte Springs FL Zip Code 32701	
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 <u><i>[Signature]</i></u> DATE <u>4</u>			
9. Capital Contributions as Shown on record. \$765,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
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 #	M70656	STREET ADDRESS	650 S. Northlake Blvd, Suite 450
NAME	LECCESSE WESTLAKE CORP.	CITY-ST-ZIP	Altamonte Springs, FL 32701
STREET ADDRESS	2221 LEE RD., SUITE 28	600054032866 05/06/05--01115--015 **535.00	
CITY-ST-ZIP	WINTER PARK, FL 32789		
DOCUMENT #			
NAME			
STREET ADDRESS			
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STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP		STREET ADDRESS	

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-7-05

Date

407-645-5575

Daytime Phone #

STAPLE CHECK HERE