


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

FILED
Feb 22, 2005 08:00 AM
Secretary of State

DOCUMENT # A32612
1. Entity Name
WISU PROPERTIES, LTD.



Principal Place of Business Mailing Address
421 DAROCO AVENUE **421 DAROCO AVENUE**
CORAL GABLES FL 33146 **CORAL GABLES FL 33146**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



4. FEI Number Applied For / Not Applied
65-0313517

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
RICHARD A. WOOD, ESQ.
% FOWLER WHITE BURNETT
100 SE 2ND STREET, 17TH FLOOR
MIAMI FL 33131

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 _____
Signature, typed or printed name of registered agent and title if applicable

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

9. Capital Contributions as Shown on record. **\$742,500.00**

10. Amount of Capital Contributions in FLORIDA to date. **564,703.80**

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

DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
V16349	WLW GROUP, INC.	421 DAROCO AVENUE	CORAL GABLES FL

13. ADDRESS CHANGES ONLY

STREET ADDRESS	CITY - ST - ZIP

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)(f), 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *William L. Wood* **WLW Group Inc., General Partner**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/14-05

Date Daytime Phone #