

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000000176

**FILED**  
**Jan 07, 2009**  
**Secretary of State**

**Entity Name:** THE WATTS PARTNERSHIP, A FLA. LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4902 SANDCASTLE CIRCLE  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 298  
ST. AUGUSTINE, FL 320850298

**New Mailing Address:**

**FEI Number:** 59-3158669

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VESTHEY, SYDNEY S SR  
4902 SANDCASTLE CIR.  
ST. AUGUSTINE, FL 32084 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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: VESTHEY, SYDNEY S SR  
Address: 4902 SANDCASTLE CIR  
City-St-Zip: ST. AUGUSTINE, FL 32084  
Document #:

Name: VESTHEY, SONYA K  
Address: 4902 SANDCASTLE CIR  
City-St-Zip: ST. AUGUSTINE, FL 32084  
Document #:

Name: VESTHEY, SHAWN C  
Address: 350 WINTERBERRY TRAIL  
City-St-Zip: BOONE, NC 28607

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SYDNEY S. VESTHEY, SR

MR.

01/07/2009

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

\_\_\_\_\_  
Date