

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

\$141.25

**FILED**

2004 MAY -7 P 2:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04232004 Chg-LP CR2E003 (10/03)

<b>DOCUMENT # A93000001364</b> 1. Entity Name <b>WHC LIMITED PARTNERS</b>					
Principal Place of Business <b>163 EAST MORSE BLVD., #230          WINTER PARK, FL 32789</b>			Mailing Address <b>163 EAST MORSE BLVD., #230          WINTER PARK, FL 32789</b>		
2. Principal Place of Business <b>172 W Warren Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>172 W Warren Ave</b> Suite, Apt. #, etc.			
City & State <b>Longwood</b> Zip <b>FL</b> Country <b>32750</b>		City & State <b>Longwood</b> Zip <b>FL</b> Country <b>32750</b>		4. FEI Number <b>59-3213208</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				6. Name and Address of Current Registered Agent <b>RAMSEUR, FRANKLIN F III          210 COLONIAL LANE          LONGWOOD, FL 32750</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	
9. Capital Contributions as Shown on record. <b>\$100,000.00</b> <b>2000 CF</b>		10. Amount of Capital Contributions in FLORIDA to date. <b>2,000 CF</b>			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	<b>P94000032434</b>		STREET ADDRESS		
NAME	<b>JRC INVENTIONS, INC.</b>		CITY-ST-ZIP		
STREET ADDRESS	<b>210 COLONIAL LANE</b>		STREET ADDRESS	<b>500036931375</b>	
CITY-ST-ZIP	<b>LONGWOOD, FL 32750</b>		CITY-ST-ZIP	<b>05/19/04--01052--003 **641.25</b>	
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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					
<b>SIGNATURE:</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date <b>4-19-04</b> Daytime Phone # <b>407-383-3368</b>		

STAPLE CHECK HERE