

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 FEB 25 PM 3:57

DOCUMENT # A95000000681

1. Entity Name
 WHARTON-SMITH PROPERTIES, LLLP



Principal Place of Business
 750 MONROE ROAD
 SANFORD, FL 32771

Mailing Address
 POST OFFICE BOX 471028
 LAKE MONROE, FL 32747



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02012008 Chg-LP CR2E003 (12/06)

4. FEI Number
 59-2626076

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, GEORGE E
 750 MONROE ROAD
 LAKE MONROE, FL 32747

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

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

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

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 #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 WHARTON, WILLIAM R
 401 MOSSY STONE COURT
 LONGWOOD, FL 32779

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SMITH, GEORGE E
 2333 ALAQUA DRIVE
 LONGWOOD, FL 32779

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
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 CITY-ST-ZIP

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DOCUMENT #
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 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE: George E. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2-6-08

Date

407-321-8410

Daytime Phone #

STAPLE CHECK HERE