2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A97000000820

1. Entity Name

WHETSTONE APARTMENTS, LTD.



SECRETARY OF STATE DIVISION OF CORPORATIONS

06 APR -7 AM 9: 15

Principal Place of Business

8400 - 49TH STREET NORTH PINELLAS PARK, FL 33781 Mailing Address

8400 - 49TH STREET NORTH PINELLAS PARK, FL 33781





01172006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-2288966

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUPPEL, DENNIS G 5201 - 102ND AVENUE, NORTH PINELLAS PARK, FL 33782

DO NOT WRITE IN THIS SPACE

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, 2006, 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.

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	12.	GENERAL PARTNER INFORMATION
	DOCUMENT #	P97000030338
	NAME	PINELLAS WHETSTONE, INC.
	STREET ADDRESS	8400 - 49TH STREET NORTH
	CITY-ST-ZIP	PINELLAS PARK, FL 33781
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMEN! #	·
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT #	
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DO NOT WRITE IN THIS SPACE

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:

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

ENATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

BREDERICK

3/1/00

227) 545 370
