

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000002335

**FILED**  
**Feb 09, 2007**  
**Secretary of State**

**Entity Name:** LESTER J. WOERNER FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

777 S. FLAGLER DR., SUITE 1100 EAST  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

777 S. FLAGLER DR., SUITE 1100 EAST  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number:** 65-0800163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES FOSTER SERVICE, LLC  
505 SOUTH FLAGLER DRIVE  
#1100  
WEST PALM BEACH, FL 33401 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 #: P97000109172  
Name: LESTER J. WOERNER, INC.  
Address: 777 S. FLAGLER DR., SUITE 1100 EAST  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: T.DAVID WILLIAMS, JR.

VP

02/09/2007

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

\_\_\_\_\_  
Date