

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # A97000002361

1. Entity Name
THE WENDMAN FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**23123 STATE RD 7
230
BOCA RATON, FL 33428**

Mailing Address
**C/O ELLIOT KAPLAN CPA PA
20801 BISCAYNE BOULEVARD STE. 403
AVENTURA, FL 33180**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242005

Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

65-0790112

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ROSENWASSER, RONALD ESQ.
THE PLAZA, SUITE 801
5355 TOWN CENTER ROAD
BOCA RATON, FL 33486**

Name

FL

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

9. Capital Contributions
as Shown on record. **\$1,344,000.00**

10. Amount of Capital Contributions
in FLORIDA to date.

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 # **P99000000210**
NAME **WENDCO REAL ESTATE CORP.**
STREET ADDRESS **23123 STATE RD 7 STE. 230**
CITY-ST-ZIP **BOCA RATON, FL 33428**

STREET ADDRESS

CITY-ST-ZIP

**1100001273915
03/23/05-80047-014 526.25**

DOCUMENT #
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CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

02/07/05

Date

Daytime Phone #

STAPLE CHECK HERE

MORTON WENDMAN