

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 25 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03292007 Chg-LP CR2E003 (12/06)

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 - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address <i>Elliot Kaplan, PA Certified Public Accountant 20801 Biscayne Blvd. Ste. 506 Aventura FL 33180</i>	
City & State			
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent ROSENWASSER, RONALD ESQ. THE PLAZA, SUITE 801 5355 TOWN CENTER ROAD BOCA RATON, FL 33486		7. Name and Address of New Registered Agent Name Friedman, Rosenwasser & Goldbaum, P.A. Street Address (P.O. Box Number is Not Acceptable) 5355 Town Center Rd., Ste. 801	
		City Boca Raton	
		FL	Zip Code 33486
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 <i>Ron Rosenwasser, VP Ron Rosenwasser</i>		DATE <i>4-11-07</i>	
Signature, typed or printed name of registered agent and date if applicable.			

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 #	P99000000210	STREET ADDRESS	
NAME	WENDCO REAL ESTATE CORP.	CITY-ST-ZIP	
STREET ADDRESS	23123 STATE RD 7 STE. 230		
CITY-ST-ZIP	BOCA RATON, FL 33428		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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: *Elsa Wendman* Elsa Wendman
16/4/07 561-451-0095
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE