## 2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

	DOCUMENT # A9800001263  1. Entity Name WRH CROSS CREEK, LTD.					2005 APR 20 AM 8: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
	Principal Place of Business  6033 EAST NW HWY DALLAS, TX 75231  Mailing Address 100 SECOND AVE S SUITE 904 ST PETERSBURG, FL 3					 	NITI KENI BENI BENI E		1 1891 A 1840 A 1840 A 1840 A 1841	
-	2. Principal P	tace of Business	3. Mailing Address							
Ì	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			03082005	Chg-LP	CR2E00	3 (10/03)	
	City & State	9	City & State			4. FEI Number 59-3511	596		Applied For Not Applicable	
-	Zip	Country	Zip	Cour	ntry		f Status Desired		8.75 Additional ee Required	
}						7Name and A	ddress of New I	Registered A	gent -	
	MILLER, JAMES G 100 SECOND AVENUE SOUTH, SUITE 904 ST. PETERSBURG, FL 33701					P.O. Box Number	it edge is Not Acceptable venue		Suite 904	
					Cist. P.	etersbu		FL	Zip Code 33 70/	
	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 Co as Shown o	on record. \$6,451,165.76 in FLORIDA to date.					\$ 5	26,	2 र	
		A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGIS' NOTE: General Partners MAY NOT be changed on the form; an amendmen					rered and active with this office. It must be filed to change a general partner.			
	12.	GENERAL PARTNE	ERTIES, INC.				ADDRESS CH	IANGES ONL'	′	
	DOCUMENT / NAME STREET ADDRESS	P93000036337 WRH PROPERTIES, INC. 100 SECOND AVENUE SOUTH			EET ADORESS					
	CITY-ST-ZIP	ST. PETERSBRUG, FL 33701			r-ST-ZIP					
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	DOCUMENT / NAME			STR	EET ADDRESS					
	STREET ADDRESS CITY-ST-ZIP			CIT	Y-ST-ZIP					
	indicated	14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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								

FILED