

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # A98000001280**

1. Entity Name  
**WEST PALM COMMERCE PARK, LIMITED**



Principal Place of Business      Mailing Address  
**% MACKEY DEVELOPMENT, INC.**      **% MACKEY DEVELOPMENT, INC.**  
**2247 PALM BEACH LAKES BOULEVARD, SUITE 204**      **2247 PALM BEACH LAKES BOULEVARD, SUITE 204**  
**WEST PALM BEACH, FL 33409**      **WEST PALM BEACH, FL 33409**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04062004      Chg-LP      CR2E003 (10/03)

City & State

City & State

4. FEI Number

**65-0843376**

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

**MACKEY, WALTER J JR.**  
**2247 PALM BEACH LAKES BLVD., SUITE 204**  
**WEST PALM BEACH, FL 33409**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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. **\$30,000.00**

10. Amount of Capital Contributions  
 in FLORIDA to date. **\$30,000.00**

**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

DOCUMENT # **P99000044137**  
 NAME **MACKEY DEVELOPMENT, INC.**  
 STREET ADDRESS **2247 PALM BEACH LAKES BLVD., SUITE 204**  
 CITY-ST-ZIP **WEST PALM BEACH, FL 33409**

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

**U000000157687**

**05/06/04 00007 008 526.25**

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

**MACKEY DEVELOPMENT, INC., GENERAL PARTNER**

**SIGNATURE:**

**Walter J. Mackey, Jr., President 4/16/04 (561)684-8811**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE