



2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

05 MAR 21 AM 10:23

DOCUMENT # A98000002478 1. Entity Name WEST LAKE SUPERCENTER PARTNERS, LTD.					
Principal Place of Business 1551 SANDSPUR ROAD MAITLAND, FL 32751			Mailing Address P.O. BOX 4961 ORLANDO, FL 32802		
2. Principal Place of Business 875 Concourse Pkwy Suite, Apt. #, etc. Suite 150 City & State MAITLAND, FL Zip 32751 Country US		3. Mailing Address SAME AS Princ. Suite, Apt. #, etc. City & State Zip Country			
01072005 Chg-LP CR2E003 (10/03)				4. FEI Number 59-3637163 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FL, INC. 390 NORTH ORANGE AVE., SUITE 1100 ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name Thomas R. Burns, Esq. Street Address (P.O. Box Number is Not Acceptable) 875 Concourse Pkwy S #150 City MAITLAND FL Zip Code 32751		
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 <u>Thomas R. Burns, Esq.</u> DATE <u>3/10/05</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$50.00		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 #	P98000086874		STREET ADDRESS		
NAME	WEST LAKE SUPERCENTER GP, INC.		CITY-ST-ZIP		
STREET ADDRESS	1551 SANDSPUR ROAD				
CITY-ST-ZIP	MAITLAND, FL 32751				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					

STAPLE CHECK HERE

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.
 BY: WEST LAKE SUPERCENTER GP, INC., general partner
 SIGNATURE: [Signature] Date 4/17/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
MICHAEL L. SCHMIDT, VICE PRES.
ALAN N. GINSBURG, President