


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 02, 2007 08:00 A
Secretary of State

DOCUMENT # A99000001162 1. Entity Name WHITE OAK INVESTMENT LIMITED PARTNERSHIP	
--	---

Principal Place of Business 216 PALM ISLAND SW CLEARWATER, FL 33767	Mailing Address 216 PALM ISLAND SW CLEARWATER, FL 33767
---	---

DO NOT WRITE IN THIS SPACE



02252007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3590627	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 FERNANDEZ, LINDA 216 PALM ISLAND SW CLEARWATER, FL 33767	DO NOT WRITE IN THIS SPACE
---	-----------------------------------

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00

U00000654444

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 #	
NAME	FERNANDEZ, LINDA D
STREET ADDRESS	216 PALM ISLAND SW
CITY-ST-ZIP	CLEARWATER, FL 33767
DOCUMENT #	
NAME	MARTINEZ-FONTS, SHERRY D
STREET ADDRESS	216 PALM ISLAND SW
CITY-ST-ZIP	CLEARWATER, FL 33767
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Linda D. Fernandez LINDA D. FERNANDEZ 2/25/07 (727) 461-1950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE