


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 23, 2007 08:00 AM
Secretary of State

DOCUMENT # B01000000050 1. Entity Name WESTLAKE POLYMERS LP	
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Principal Place of Business 2801 POST OAK BLVD., SUITE 600 HOUSTON, TX 77056	Mailing Address 2801 POST OAK BLVD., SUITE 600 HOUSTON, TX 77056
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-LP CR2E003 (12/06)

4. FEI Number 76-0144230	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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


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 #	F01000000768
NAME	WESTLAKE CHEMICAL INVESTMENTS, INC.
STREET ADDRESS	2801 POST OAK BLVD., SUITE 600
CITY-ST-ZIP	HOUSTON, TX 77056
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

U000000599605
01/25/07-80034-011 500.00

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:  **Stephen Wallace** **1-15-07** **(713) 960-9111**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #