


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAR 14 AM 8:34

DOCUMENT # B07000000033	
1. Entity Name WD LP OF CALIFORNIA	

Principal Place of Business 316 RICARDO ROAD MILL VALLEY, CA 94941	Mailing Address 316 RICARDO ROAD MILL VALLEY, CA 94941
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2. Principal Place of Business - No P.O. Box # 655 REDWOOD HIGHWAY	3. Mailing Address 655 REDWOOD HIGHWAY
Suite, Apt. #, etc. SUITE 285	Suite, Apt. #, etc. SUITE 285

02202008 Chg-LP CR2E003 (12/06)

City & State MILL VALLEY CA	City & State MILL VALLEY CA	4. Fbi Number 94-3386701	Applied For Not Applicable
Zip 94941	Country USA	Zip 94941	Country USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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, 2008, 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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	M06000004377 ST. REGIS PROPERTIES, INC. 316 RICARDO ROAD MILL VALLEY, CA 94941	STREET ADDRESS CITY-ST-ZIP	655 REDWOOD HIGHWAY, SUITE 285 MILL VALLEY CA 94941
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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STAPLE CHECK HERE

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: *Arthur Jan* 3/1/08 415 381-8800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #