## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## FILED Apr 04, 2006 08:00 AM Secretary of State Due By May 1, 2006 DOCUMENT # A01000001426 RPV INVESTMENTS, LTD. Principal Place of Business Mailing Address 1181 S. ROGERS CIRCLE, SUITE 31 1181 S. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487 BOCA RATON, FL 33487 01172006 No Cha-LP CR2E003 (11/05) 4. FEI Number Applied For 65-1147158 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NATIONAL CUSTOM HOMES IX, INC. DO NOT WRITE 1181 S. ROGERS CIRCLE, SUITE 31 -IN THIS SPACE BOCA RATON, FL 33487 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 em familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and this it applicable DATE FILE NOW!!! FEE 1S \$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 DOCUMENT # NAME NATIONAL CUSTOM HOMES IX, INC STREET ADDRESS 1181 S. ROGERS CIRCLE, SUITE 31 U00000491402 CITY-ST-ZIP BOCA RATON, FL 33487 04/19/06-80020-016 DOCUMENT # NAME STREET ACCRESS CITY-ST-ZIP The same of the sa DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT #

14. I nereby certify that the information supplied with this filling 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 it 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 520, Further Signature

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CHY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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