2006 I IMITED PARTNERSHID ANNIIAL REDORT

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Due By May 1, 2006				Apr 24, 2006 08:00		
1. Entity Nan	MENT # A16370 ORTH VILLAGE, LTD.					etary of Stat
Principal Place of Business 31550 NORTHWESTERN HIGHWAY, SUITE 200 51550 NORTHWESTERN HIGHWAY, SUITE 200 51550 NORTHWESTERN HIGH 51550 FARMINGTON HILLS, MI 48334 51550 NORTHWESTERN HIGH 51550 FARMINGTON HILLS, MI 48334 51550 NORTHWESTERN HIGH			WAY, SUITE 200 4		rce kiree iins (beit beit bib)	Singi Singi alahi alahi akaligi ki jang
С	OO NOT WRITE		CE	01092006 No. 4. FEI Number 59-2413:	o Chg-LP (CR2E003 (11/05) Applied For Not Applicable \$8.75 Additionat Fee Required
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525					NOT WR HIS SPA	
8. The above the obliga SIGNATURE	e named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent an		ed office or register	ed agent, or both,		I am familiar with, and accept
	After May 1, 20	il! FEE IS \$500.00 06, Fee will be \$900.00	<u> </u>			<u> </u>
	NOTE: General Partners MAY					
12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	PARTRICH, SPENCER M 31550 NORTHWESTERN HWY., S FARMINGTON HILLS, MI 48334 SHAPIRO, MICKEY 31550 NORTHWESTERN HWY., S FARMINGTON HILLS, MI 48334	STE. 200			U000005 05/06/06-6	31563 80045-009 500.00
DOCUMENT # NAME STREET ADDRESS ETTY-ST-ZIP DOCUMENT #	PARWINGTON FILLS, WE 46554				OT WRI	-
NAME STREET ADDRESS CITY ST. ZIP DOCUMENT # NAME STREET ADDRESS CITY ST. ZIP DOCUMENT #						

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 empewered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURÉ

STAPLE CHECK HERE

NAME STREET ADDRESS CITY-ST-ZIP

DIEN CEN M. PARTRICH.

P51-2700

Daytime Phone #