

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A17651**

1. Entity Name

**VILLAGE GREEN LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 17 AM 11:43



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1873 SOUTH BELLAIRE STREET, SUITE 1700 DENVER CO 80222-4348	Mailing Address 1873 SOUTH BELLAIRE STREET, SUITE 1700 DENVER CO 80222-4360
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2. Principal Place of Business 2000 South Colorado Blvd.	3. Mailing Address 2000 South Colorado Blvd.
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Suite, Apt. #, etc. Tower Two, Suite 2-1000	Suite, Apt. #, etc. Tower Two, Suite 2-1000
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City & State Denver, CO	City & State Denver, CO
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4. FEI Number 52-1362419	Applied For Not Applicable
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Zip 80222	Country USA	Zip 80222	Country USA	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**

**UNITED STATES CORPORATION COMPANY**  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE FL 32301

**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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. <b>\$99.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 # A06999	NAME NATIONAL HOUSING PART.	STREET ADDRESS	2000 South Colorado Boulevard
STREET ADDRESS	1225 EYE STREET, NW., SUITE 200	CITY - ST - ZIP	Tower Two, Suite 2-1000
CITY - ST - ZIP	WASHINGTON DC 20005	CITY - ST - ZIP	Denver, CO 80222
DOCUMENT #	NAME	STREET ADDRESS	
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CITY - ST - ZIP		STREET ADDRESS	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Village Green Limited Partnership, by its GP, The National Housing Partnership, by its GP,  
National Corporation for Housing Partnerships

SIGNATURE: By: Joel Bonder, Secretary 4-6-00 (303) 757-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)