2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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1. Entity Name

VILLAGE GREEN LIMITED PARTNERSHIP



SECRETARY OF STATE

DIVISION OF CORPORATIONS

03 SEP -4 PM 1:54 Principal Place of Business 2000 S. COLORADO BLVD., TWR. 2, #2-1000 2000 S. COLORADO BLVD., TWR. 2. #2-1000 DENVER CO 80222 DENVER CO 80222 2. Principal Place of Business 3. Mailing Address 4582 S. ULSTER ST. PKWY. 4582 S. ULSTER ST. PKWY. Suite, Apt. #, etc. SUITE 1100 Suite, Apt SUITE 1100 **DUE BY SEPTEMBER 24, 2003** City & State ENVER 4. FEI Number 52-1362419 City & StateNVER Applied For CO CO Not Applicable 80237 บร 80237 US Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. **SUITE 105** TALLAHASSEE FL 32301 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$99.00 SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. in FLORIDA to date. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 13. A06999 DOCUMENT # STREET ADDRESS 4582 S ULSTER ST PKWY NATIONAL HOUSING PART. **SUITE 1100** 2000 S. COLORADO BLVD., TWR. 2, #2-1000 STREET ADDRESS DENVER CO 80237 CITY-ST-ZIP CITY-ST-ZIP DENVER CO 80222

STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 600022756206 09/04/03--01032--026 **141.25 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

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

SIGNATURE:

CITY-ST-ZIP

DOCUMENT #

SIGNATURE AND TYPED OR PRINTED NAME OF

Chad'Asarch-for-The National Housing Partnership, Ltd., general Date

08/18/03

303-757-8101

CR2E003 (4/03)