2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # A25562

1. Entity Name
OLD DOMINION LIMITED PARTNERSHIP I

Principal Place of Business	Mailing Address
4040 FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	4040 FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203

04062007 Chg-LP CR2E003 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 54-1434942 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCMULLIN, JAMES H 72 LA GORCE CIRCLE, LA GORCE ISLAND MIAMI BEACH, FL 33141	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2007, 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 #	F06000006031	STREET ADDRESS	
NAME	EDJIM MANAGEMENT CORP.	CITY-ST-ZIP	
STREET ADDRESS	4040 FAIRFAX DR., #100		
CITY-ST-ZIP	ARLINGTON, VA		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	U00000709400 04/25/07-80001-010 500.00
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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: James H. McMullin James H. McMullin, General Partner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #