

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # A94000000985

1. Entity Name
BALLET VILLAGES HOUSING LIMITED PARTNERSHIP



Principal Place of Business
**3307 NORTH LAVE BLVD, SUITE 107
PALM BEACH GARDENS, FL 33403**

Mailing Address
**3307 NORTH LAVE BLVD, SUITE 107
PALM BEACH GARDENS, FL 33403**



04102008 No Chg-LP

CR2E003 (12/06)

4. FEI Number
65-0459614

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CROSSEN, JOSEPH F
3307 NORTH LAVE BLVD, SUITE 107
PALM BEACH GARDENS, FL 33403**

**DO NOT WRITE
IN THIS SPACE**

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

U000000915451
~~05/09/08-90015-015 500.00~~

**FILE NOW!!! FEE IS \$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 # **P94000000102**
NAME **BALLET VILLAGES DEVELOPMENT CORP**
STREET ADDRESS **3307 NORTHLAKE BLVD #107**
CITY-ST-ZIP **PALM BEACH GARDENS, FL 33403**

DOCUMENT #
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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-21-08

561-626-2778

STAPLE CHECK HERE