

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000000985

**FILED**  
**Apr 14, 2009**  
**Secretary of State**

**Entity Name:** BALLET VILLAGES HOUSING LIMITED PARTNERSHIP

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

3307 NORTHLAKE BLVD, SUITE 107  
PALM BEACH GARDENS, FL 33403

**Current Mailing Address:**

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

**New Mailing Address:**

COMPLETE PROPERTY MANAGEMENT, INC.  
3307 NORTHLAKE BLVD., SUITE 107  
PALM BEACH GARDENS, FL 33403

**FEI Number:** 65-0459614

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P94000000102  
Name: BALLET VILLAGES DEVELOPMENT CORP  
Address: 3307 NORTHLAKE BLVD #107  
City-St-Zip: PALM BEACH GARDENS, FL 33403

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOSEPH F. CROSSEN

GP

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date