2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2006

Apr 10, 2006 08:00 AM Secretary of State DOCUMENT # A96000002031 1. Entity Name WOODMARK (DELTONA) PIP INVESTORS LIMITED PARTNERSHIP Principal Place of Business Mailing Address 923 N. PENNSYLVANIA AVE. WINTER PARK FL 32789 923 N. PENNSYLVANIA AVE. WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E003 (10/05) City & State City & State 4. FEI Number Applied For 59-3409433 Not Applicable Zip Country Ζiρ 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 Name SCHWARTZ, CHARLES Street Address (P.O. Box Number is Not Acceptable) 923 N. PENŃSYLVANIA AVE. WINTER PARK FL 32789 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 ponted hame eldspirtage is ellit bris kreps parau DATE FILE NOW!!! Fee is \$500. After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State. 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 DOCUMENT # G02163900074 U00000500933 STREET ADDRESS NAME AVANTI CAPITAL ASSOCIATES 04/25/06-80041-011-500.00 STREET ADDRESS 923 N. PENNSYLVANIA AVE. CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-57-702 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS COTY-ST-70P CHTY-SY-ZP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET AGGRESS NAME STREET ADDRESS CITY-ST-ZIP City-St-70 14. I hereby certify that the information supplied with this filing does not quality 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.

FILED

4076288488