


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership  BARON STRATEGIC INVESTMENT FUND IX, LTD.		1a. DOCUMENT # A97000000736	
Mailing Address % GREGORY K. MCGRATH 7826 COOPER RD. CINCINNATI OH 45242		Principal Office Address % GREGORY K. MCGRATH 7826 COOPER RD. CINCINNATI OH 45242	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Formed or Registered 03/31/1997		5a. Capital Contributions as Shown on record. \$99.00	
3a. Date of Last Report 12/30/1997		5b. Amount of Capital Contributions in FLORIDA to date.	
4. State or Country of Formation FL		6. FEI Number 31-1547437	
7. Certificate of Status Desired 8. Make check payable to: Dept. of State (See reverse side for fee information)		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent SCHMERGE, MICHAEL 28050 U.S. HIGHWAY 19 NORTH SUITE 301 CLEARWATER FL 34621		10. If changed, new Registered Agent/Office Name McGrath, Gregory Street Address (P.O. Box Number is Not Acceptable) 4561 Gulf of Mexico DRIVE Suite, Apt. #, etc. #101 City Longboat Key FL Zip Code 34228	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment) DATE 12-28-98			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s) BARON CAPITAL LXII, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <del>795 COOPER ROAD</del> 7826 Cooper Road	11b. City, State & Zip Code CINCINNATI OH 45242	11c. Registration/Document Number P97000048443
500002748905--8 -01/21/99--01008--001 ***1800.00 ****150.00			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.			
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.			
SIGNATURE Typed or Printed Name of General Partner Signing Form Gregory K. McGrath		DATE 12/22/98 Daytime Telephone Number 513-984-5001	

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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