


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 MAY -3 PM 2: 58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                 |                                                                                   |
|---------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # A98000001480         |  |
| 1. Entity Name<br>FPIP IX, LTD. |                                                                                   |

|                                                                                                        |                                                                                            |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Principal Place of Business<br>3696 NORTH FEDERAL HIGHWAY, SUITE 200<br>FORT LAUDERDALE, FL 33308-6262 | Mailing Address<br>3696 NORTH FEDERAL HIGHWAY, SUITE 200<br>FORT LAUDERDALE, FL 33308-6262 |
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| 2. Principal Place of Business<br><br>401 EAST LAS OLAS BLVD.<br>SUITE 1000<br>FT. LAUDERDALE, FL 33301 | 3. Mailing Address<br><br>401 EAST LAS OLAS BLVD.<br>SUITE 1000<br>FT. LAUDERDALE, FL 33301 |
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04142005 Chg-LP CR2E003 (10/03)

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| 4. FEI Number<br>65-0844354 | Applied For<br>Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|-----------------------------------------------------------|--------------------------------|

|                                                                                                                                                        |                                |
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| 6. Name and Address of Current Registered Agent<br><br>MORGAN, GEORGE A JR.<br>3696 NORTH FEDERAL HIGHWAY, SUITE 200<br>FORT LAUDERDALE, FL 33308-6262 | Name<br>Street Address<br>City |
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| 7. Name and Address of New Registered Agent<br><br>401 EAST LAS OLAS BLVD.<br>SUITE 1000<br>FT. LAUDERDALE, FL 33301 | Name<br>Street Address<br>City |
|----------------------------------------------------------------------------------------------------------------------|--------------------------------|

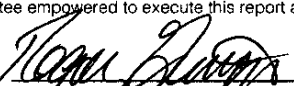
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| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. |            |
| SIGNATURE _____                                                                                                                                                                                                               | DATE _____ |
| Signature, typed or printed name of registered agent and title if applicable.                                                                                                                                                 |            |

|                                                       |                                                         |
|-------------------------------------------------------|---------------------------------------------------------|
| 9. Capital Contributions as Shown on record. \$495.00 | 10. Amount of Capital Contributions in FLORIDA to date. |
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**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 #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | L01645<br>FLORIDA PROPERTY INVESTMENT PARTNERS, INC.<br>3696 NORTH FEDERAL HIGHWAY, SUITE 200<br>FORT LAUDERDALE, FL 333086262 | STREET ADDRESS<br>CITY-ST-ZIP | 401 EAST LAS OLAS BLVD.<br>SUITE 1000<br>FT. LAUDERDALE, FL 33301 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                                | STREET ADDRESS<br>CITY-ST-ZIP | 800055383118<br>05/27/05--01004--009 **141.25                     |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                                | STREET ADDRESS<br>CITY-ST-ZIP |                                                                   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                                | STREET ADDRESS<br>CITY-ST-ZIP |                                                                   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                                | STREET ADDRESS<br>CITY-ST-ZIP |                                                                   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                                                | STREET ADDRESS<br>CITY-ST-ZIP |                                                                   |

STAPLE CHECK HERE

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| 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:                                                                                                                                                                                                                                                                                                                                                                                               | Date: 4/27/05 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER                                                                                                                                                                                                                                                                                                                                                                                                                              |               |
| Daytime Phone #: 954-522-6010                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |