


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY SEPTEMBER 7, 2005**

DOCUMENT # B01000000175 1. Entity Name NVCP, LIMITED PARTNERSHIP						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 05 AUG -4 AM 8:59	
Principal Place of Business 43 CHEPACHET ROAD AVON CT 06001				Mailing Address 43 CHEPACHET ROAD AVON CT 06001			
2. Principal Place of Business		3. Mailing Address				2nd MOORE CR2E003 (5/05)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number 06-1490114				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent EASTON, EDWARD 10165 NW 19TH STREET, EASTON & ASSOC. MIAMI FL 33172				7. Name and Address of New Registered Agent iName Street Address (P.O. Box Number is Not Acceptable) City FL 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.						11. FILE NOW!!! Due by September 7, 2005! See Block 11 instructions for fee info. If first notice was not received, check box and do not include \$400 late fee. <input checked="" type="checkbox"/>	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>						DATE _____	
9. Capital Contributions as Shown on record. \$3,000,000.00		10. Amount of Capital Contributions in FLORIDA to date.					
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 # F01000002683 NAME PERFITO MANAGEMENT, INC. STREET ADDRESS 43 CHEPACHET ROAD CITY-ST-ZIP AVON CT 06001				STREET ADDRESS CITY-ST-ZIP			
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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: <i>NVC Pyto Nick PERFITO</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				Aug 1, 2005 260 675-6430 <small>Date Daytime Phone #</small>			

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