2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SECRETARY OF STATE DIVISION OF COMPERATIONS DOCUMENT # B05000000072 07 FEB 14 AM 9:53 CAMBRIDGE DEVELOPMENT GROUP LIMITED **PARTNERSHIP** Principal Place of Business Mailing Address 560 HERNDON PARKWAY, SUITE 210 560 HERNDON PARKWAY, SUITE 210 HERNDON, VA 20170 HERNDON, VA 20170 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262007 Chq-LP CR2E003 (12/06) 54. 19092001 City & State City & State 4. FEI Number Applied For APPLIED FOR Not Applicable Zip Country Zip 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 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 ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS NAME CAMBRIDGE DEVELOPMENT GROUP, INC. STREET ADDRESS 560 HERNDON PARKWAY, SUITE 210 CITY-ST-ZIP CITY-ST-ZIP HERNDON, VA 20170 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 500098834385 02/20/07-01097-007 CITY-ST-ZIP CITY-ST-ZIP ື່ຂ້ອີ່ຈັກກຸກກຸ DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP is filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information it my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership apport as equired by Chapter 620, Florida Statutes 14-1 hereby certify that the information supplied with indicated on this report is true and accurate and hat or the receiver or trustee empowered to execute this

Andrew J Czekaj 2

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