


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 23 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B06000000352	
1. Entity Name VALLEY APARTMENTS, LTD.	

Principal Place of Business % HARRIS CRAMER LLP 1555 PALM BEACH LAKES BLVD., STE. 310 WEST PALM BEACH, FL 33401-4325	Mailing Address % HARRIS CRAMER LLP 1555 PALM BEACH LAKES BLVD., STE. 310 WEST PALM BEACH, FL 33401-4325
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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02052007 Chg-LP CR2E003 (12/06)

4. FEI Number 65-0774942	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HARRIS CRAMER LLP 1555 PALM BEACH LAKES BLVD. SUITE 310 WEST PALM BEACH, FL 33401-4325	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P96000079941	STREET ADDRESS	
NAME	SPRING VALLEY GENERAL PARTNER, INC.	CITY-ST-ZIP	
STREET ADDRESS	1555 PALM BEACH LAKES BLVD., STE. 310		
CITY-ST-ZIP	WEST PALM BEACH, FL 33401		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify 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

Spring Valley General Partner, Inc.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

By: Fabrizio Lucchese, Vice President

STAPLE CHECK HERE

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05/09/07--01005--013 **508.75

March 15/07

905-882-1212