16161

2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 12, 2008

DOCUMENT # B93000000577

1. Entity Name MV REALTY LIMITED PARTNERSHIP

Principal Place of Business

801 OLD YORK ROAD, NOBLE PLAZA JENKINTOWN, PA 19046

Mailing Address

801 OLD YORK ROAD, NOBLE PLAZA JENKINTOWN, PA 19046

FILED Jun 30, 2008 08:00 AM Secretary of State



06192008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 38-3151394 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

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The above named entity submits this statement for the purpose of changing its registered office or registered the obligations of registered agent.	d agent, or both, in the State of Florida. It am familiar with, and accept
the contract of the contract o	
SIGNATURE	DATE
Signature, typed or printed name of registered agent and title if applicable.	DATE
FILE NOWIII FEE IS \$900.00 On or after September 12, 2008, Fee will be \$1000.00	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTE NOTE: General Partners MAY NOT be changed on the form; an amendment	RED AND ACTIVE WITH THIS OFFICE. must be filed to change a general partner.
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GENERAL PARTNER INFORMATION A97000002313 DOCUMENT # CRYSTAL PALMS LIMITED PARTNERSHIP NAME 801 OLD YORK ROAD, NOBLE PLAZA STREET ADDRESS CITY-ST-ZIP-JENKINTOWN, PA 19046 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

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

SIGNATURE:

CITY-ST-ZIP

DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

STREET ADDRESS CITY-ST-ZIP - DOCUMENT # -NAME STREET ADDRESS CITY-ST-7IP

SIGNATURE AND