2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

DOCUMENT # A24239

1. Entity Name

CROSSINGS SHOPPING VILLAGE ASSOCIATES LLLP

SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB 14 AM 11:17

Principal Place of Business	Mailing Address
930 WASHINGTON AVE., 4TH FLOOR MIAMI BEACH FL 33139-5084	930 WASHINGTON AVE., 4TH FLOOR MIAMI BEACH FL 33139-5084

1st MOORE CR2E003 (10/05)

2. Principal Place of Business	3. Mailing Address
6625 Miami Lakes Drive	6625 Miami Lakes Drive
Suite, Apt. #, etc.: Suite 316	Suite, Apt. #, etc.: Suite 316
City & State: Miami Lakes, Florida	City & State: Miami Lakes, Florida
Zip: 33014-2705 Country: USA	Zip: 33014-2705 Country: USA

4. FEI Number: 59-2785470 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRIEDMAN, MICHAEL DEAN, ESQ. 930 WASHINGTON AVE., 4TH FLOOR MIAMI BEACH FL 33139-5084	Name: Michael D. Friedman Street Address (P.O. Box Number is Not Acceptable): 6625 Miami Lakes Drive Suite 316 City: Miami Lakes **FL** Zip Code: 33014-2705

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 _____ 1/30/06
Signature, typed or printed name of registered agent and title if applicable — DATE

FILE NOW!!! Fee is $500. * After May 1, 2006, fee will be $900. *** Make check payable to Florida Department of State.**

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 #		STREET ADDRESS	6625 Miami Lakes Drive, Suite 316
NAME	FRIEDMAN, MICHAEL D	CITY-ST-ZIP	Miami Lakes, Florida 33014-2705
STREET ADDRESS	930 WASHINGTON AVE., 4TH FLOOR		
CITY-ST-ZIP	MIAMI BEACH FL 33139-5084		
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02/20/06 01016 007 **500.00

STAPLE CHECK HERE

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: _____ 1/30/06 (305) 777-0760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #