2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

DOCUMENT # B9900000272 1. Entity Name INDIANTOWN PROJECT INVESTMENT PARTNERSHIP, L.P.					2005 MAY -4 PM 12: 05 SECRETARY OF STATE JALLAHASSEE, FLORIDA			
Principal Plac	e of Business							
7600 WISCONSIN AVE 7600 WISCONSIN AVE BETHESDA, MD 20814 BETHESDA, MD 20814								
DETTIESDA, I	VID 20014			1	50 (D)(4 00)(1 00)(1 00)(1			
Principal Place of Business 3. Mailing Address					-			
9405 Arrowpoint Blvd. 9405 Arrowp			int Blvd.		1 30 8 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IB (BILI BBILI BBILI	BOTH OTHER	A
Suite, Apt. #, etc. Suite, Apt. #, etc.				04222005 Chg-LP CR2E003 (10/03)				
City & State Charlotte, NC		City & State Charlobte, NC		4. FEI Number 52-21293	57		Applied For Not Applicable	
Zip Country		Zip Country			5. Certificate of		□ \$8	3.75 Additional
28273-		28273-8110		USA			— Fe	e Required
	6. Name and Address of Current	Name	7. Name and Ad	dress of New Re	egisterea Age	ent		
	ATION SERVICE COMPANY		Street Address (P.O. Box Number is Not Acceptable)					
	S STREET SSEE, FL 32301-2525							
				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.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE								
9. Capital Co as Shown		butions						
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	13.						
DOCUMENT #	P40686 TOYAN ENTERPRISES CORPORATION			EET ADDRESS	2403 ALLOWPOINT BIVE.			
NAME STREET ADDRESS				<u> </u>				
CITY-ST-ZIP				-ST-ZIP				
DOCUMENT # NAME			STRI	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZIP				
DOCUMENT #			STRI	EET ADDRESS				
NAME STREET ADDRESS			CITY	r-ST-ZIP				
CITY-ST-ZIP DOCUMENT #			STRI	EET ADDRESS	00.400	0055	<u>age</u>	21
NAME STREET ADDRESS	NAME STREET ADDRESS				100055713621 06/03/0501056001 **141.25			
CITY-ST-ZIP			City	-ST-ZIP				
DOCUMENT # NAA®			STRE	EET ADDRESS				
STASET ADORESS CITY-ST-ZIP			CITY	r-ST-ZIP				··· <u>.</u> .
DOCUMENT #			STRI	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZIP				
14. Thereby 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 proof is true and accurate and that my climature shall have the same level of the limited neutropy in or								

FILED