2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 06, 2006 08:00 AM Secretary of State

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INDIÁNTOWN PROJECT INVESTMENT PARTNERSHIP,



Principal Place of Business

9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110 Mailing Address

9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110



DO NOT WRITE IN THIS SPACE

03222006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 52-2129357 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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 tamiliar with, and accept
	the obligations of registered agent.	

Signature, typed or printed name of registered agent and title if applicable

DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2006, 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.

GENERAL PARTNER INFORMATION 12. M05000006021 DECEMENT 4 NAME TOYAN ENTERPRISES, LLC STREET ADDRESS 9405 ARROWPOINT BLVD CITY-ST-ZIP **CHARLOTTE, NC 282738110** DOCUMENT # NAME STREET ADDRESS CITY-ST-IIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP OCCUMENT 6

UDD000494916 04/20/06-80061-023 500.00

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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 Panner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Thomas I Ronnar