


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 MAY -7 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A01000000989		
1. Entity Name FPIP XI, LTD.		

Principal Place of Business 3696 NORTH FEDERAL HIGHWAY, SUITE #200 FORT LAUDERDALE, FL 33308-6262	Mailing Address 3696 NORTH FEDERAL HIGHWAY, SUITE #200 FORT LAUDERDALE, FL 33308-6262
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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04302004 Chg-LP CR2E003 (10/03)

4. FEI Number APPLIED FOR	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MORGAN, GEORGE A JR. 3696 NORTH FEDERAL HIGHWAY, SUITE #200 FORT LAUDERDALE, FL 33308-6262	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.

9. Capital Contributions as Shown on record. \$495.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	L01645	STREET ADDRESS	
NAME	FLORIDA PROPERTY INVESTMENT PARTNERS, INC.	CITY-ST-ZIP	
STREET ADDRESS	3696 NORTH FEDERAL HIGHWAY SUITE #200		
CITY-ST-ZIP	FORT LAUDERDALE, FL 333086262		
DOCUMENT #		STREET ADDRESS	100037532321
NAME		CITY-ST-ZIP	06/02/04 01005 004 **141.25
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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 exemption stated in Section 119.07(3)(i), 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:  4/30/04 954 563-8600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE