


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

2005 MAY -3 PM 2: 58

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 401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301	3. Mailing Address 401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301
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04142005 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 401 EAST LAS OLAS BLVD. SUITE 1000 City FT. LAUDERDALE, FL 33301 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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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 # NAME STREET ADDRESS CITY-ST-ZIP	L01645 FLORIDA PROPERTY INVESTMENT PARTNERS, INC. 3696 NORTH FEDERAL HIGHWAY SUITE #200 FORT LAUDERDALE, FL 333086262	STREET ADDRESS CITY-ST-ZIP	401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	200055383092 05/27/05--01004--008 **141.25
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PLEASE CHECK HERE

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: 		Date 4/27/05	Daytime Phone # 954 522-6010
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			