


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # A04000000612	
1. Entity Name PIONEER PARTNERS #11, LTD.	
	
Principal Place of Business 29296 U.S. HIGHWAY 19 NORTH, SUITE 204 CLEARWATER, FL 33761	Mailing Address 29296 U.S. HIGHWAY 19 NORTH, SUITE 204 CLEARWATER, FL 33761



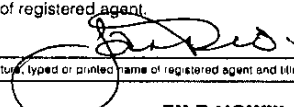
01092007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0161570	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RIOS, JAN 29296 U.S. HIGHWAY 19 NORTH, SUITE 104 CLEARWATER, FL 33761	DO NOT WRITE IN THIS SPACE
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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  01/08/2007
Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	J89150 PIONEER TITLE, INC. 29296 U.S. HIGHWAY 19 NORTH, SUITE 104 CLEARWATER, FL 33761
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01/22/07-80047-023 500.00

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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:  01/08/2007 (727) 787-6904
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #