

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Apr 14, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A13060**

**1. Entity Name**  
CROSSROADS APARTMENTS OF ORLANDO, LTD.



**Principal Place of Business**  
3740 BEACH BLVD., SUITE 300  
JACKSONVILLE, FL 32207

**Mailing Address**  
3740 BEACH BLVD., SUITE 300  
JACKSONVILLE, FL 32207



04062006 No Chg-LP

CR2E003 (11/05)

**4. FEI Number**  
59-2235860

**Applied For**  
☐ **Not Applicable**

**5. Certificate of Status Desired**

☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

DEMETREE, JACK C  
3740 BEACH BLVD.  
SUITE 300  
JACKSONVILLE, FL 32207

**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 familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

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.**

**12. GENERAL PARTNER INFORMATION**

**DOCUMENT #** L99000001938  
**NAME** JCD CROSSROADS, L.L.C.  
**STREET ADDRESS** 3740 BEACH BLVD., SUITE 300  
**CITY - ST - ZIP** JACKSONVILLE, FL 32207

**DOCUMENT #** L99000001939  
**NAME** WCD CROSSROADS, L.L.C.  
**STREET ADDRESS** 3740 BEACH BLVD., SUITE 300  
**CITY - ST - ZIP** JACKSONVILLE, FL 32207

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**CITY - ST - ZIP**

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04/29/06-80040-008 508.75^M

**DO NOT WRITE IN THIS SPACE**

**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:**

*Jack C Demeter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/7/06

**Date**

**Daytime Phone #**

JCD CROSSROADS L.L.C. G.P.

STAPLE CHECK HERE