

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 25 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000000874	
1. Entity Name CUTLER RIDGE REGIONAL CENTER, LTD.	



Principal Place of Business 11900 BISCAYNE BLVD. STE #801 NORTH MIAMI, FL 33181	Mailing Address 11900 BISCAYNE BLVD. STE #801 NORTH MIAMI, FL 33181
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2. Principal Place of Business - No P.O. Box # 1111 Park Centre Blvd	3. Mailing Address 1111 Park Centre Blvd
Suite, Apt. #, etc. #360	Suite, Apt. #, etc. #360

City & State Miami FL	City & State Miami FL
Zip 33169	Zip 33169
Country USA	Country USA



04132007 Chg-LP CR2E003 (12/06)

4. FEI Number 59-1266838	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 C.R.S.A., INC. 11900 BISCAYNE BLVD, STE #801 NORTH MIAMI, FL 33181	
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7. Name and Address of New Registered Agent Name CRSA Inc Street Address (P.O. Box Number is Not Acceptable) 1111 Park Centre Blvd #360 City Miami FL Zip Code 33169	
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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 *Karen A. Allen* *Karen A. Allen Corp Sec'y CRSA Inc* 4-18-07
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 #	P95000076148
NAME	C.R.S.A., INC.
STREET ADDRESS	11900 BISCAYNE BLVD, STE #801
CITY-ST-ZIP	NORTH MIAMI, FL 33181
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	1111 Park Centre Blvd #360
CITY-ST-ZIP	Miami FL 33169
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

900101222339
05/02/07--01046--004 **500.00

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: *Karen A. Allen* *Karen A. Allen Corp Sec'y* 4-18-07 305859 8194
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE