

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # A96000000927

1. Entity Name
6484 INDIAN CREEK DRIVE, LTD.



Principal Place of Business
11300 N.E. SECOND AVENUE
MIAMI SHORES, FL 33161-6695

Mailing Address
11300 N.E. SECOND AVENUE
MIAMI SHORES, FL 33161-6695



DO NOT WRITE IN THIS SPACE

01032006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
65-0669854

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSENBERG, DONALD S
ONE S.E. THIRD AVENUE, SUITE 2600
MIAMI, FL 33131

**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 # P95000094189
NAME 6484 INDIAN CREEK DRIVE, INC.
STREET ADDRESS 11300 N.E. SECOND AVENUE
CITY-ST-ZIP MIAMI SHORES, FL 331616695

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000000382625
01/12/06-80021-004 508.75

**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: Timothy H. Czerniec

1/03/06

305-899-3050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE